

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088831

Entity Name: NASKAPI, LLC

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

PO BOX 23192
JACKSONVILLE, FL 32241

New Principal Place of Business:

4496 SOUTHSIDE BLVD
JACKSONVILLE, FL 32241

Current Mailing Address:

PO BOX 23192
JACKSONVILLE, FL 32241

New Mailing Address:

FEI Number: 20-2001188 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LEONE, JOHN R
4496 SOUTHSIDE BLVD.
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEONE, JOHN R
Address: PO BOX 23192
City-St-Zip: JACKSONVILLE, FL 32241

Title: MGRM () Delete
Name: GREENE, MICHAEL F
Address: PO BOX 23192
City-St-Zip: JACKSONVILLE, FL 32241

Title: MGRM () Delete
Name: MAHFOUD, ANTONIO J
Address: PO BOX 23192
City-St-Zip: JACKSONVILLE, FL 32241

Title: MGRM () Delete
Name: SHAW, STEVEN L
Address: PO BOX 23192
City-St-Zip: JACKSONVILLE, FL 32241

Title: MGRM () Delete
Name: MCMILLAN, JOSEPH L
Address: PO BOX 23192
City-St-Zip: JACKSONVILLE, FL 32241

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEONE, JOHN R
Address: 4496 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM (X) Change () Addition
Name: GREENE, MICHAEL F
Address: 4496 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM (X) Change () Addition
Name: MAHFOUD, ANTONIO J
Address: 4496 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM (X) Change () Addition
Name: SHAW, STEVEN L
Address: 4496 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM (X) Change () Addition
Name: MCMILLAN, JOSEPH L
Address: 4496 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32216

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN R. LEONE

MM

05/01/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date