

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
May 30, 2006 8:00 am
Secretary of State

04-13-2006 90030 039 ****50.00

DOCUMENT # L05000007859

1. Entity Name
NICHOLAS RULAND, LLC



Principal Place of Business
**938 PRESCOTT STREET
FORT MYERS BEACH, FL 33931**

Mailing Address
**938 PRESCOTT STREET
FORT MYERS BEACH, FL 33931**

30009153



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04072006 Chg-LLC CR2E083 (11/05)

4. FEI Number

1100E-55-0913556

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WANDERON, THOMAS
868 106TH AVENUE NORTH
NAPLES, FL 34108**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature of person or persons registered agent with the company.

(NOT: Registered Agent's signature required when changing)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**MGRM
RULAND, NICHOLAS
938 PRESCOTT STREET
FORT MYERS BEACH, FL 33931**

☐ Delete

TITLE
NAME
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

[Signature]

4/7/06 239-765-0440

SIGNATURE AND PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Print the Name