

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000012761

Entity Name: NO FEATHERS LLC

FILED
Feb 12, 2007
Secretary of State

Current Principal Place of Business:

ST. LUCIE WEST PLAZA
870 SW ST. LUCIE WEST BLVD. SUITE 7, 8
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

962 SW SAINT LUCIE WEST BLVD
PORT ST LUCIE, FL 34986

Current Mailing Address:

9024 SW CHRYSLER CIRCLE
STUART, FL 34997

New Mailing Address:

962 SW SAINT LUCIE WEST BLVD
PORT ST LUCIE, FL 34986

FEI Number: 36-4591598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINES, BRIAN W
9024 SW CHRYSLER CIRCLE
STUART, FL 34997 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: MGR () Delete
Name: FINES, BRIAN W
Address: 9024 SW CHRYSLER CIRCLE
City-St-Zip: STUART, FL 34997

Title: MGR () Delete
Name: BIANCO, EDWARD
Address: 371 SW UNDALLO RD
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWARD BIANCO

MGR

02/12/2007

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