

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000014193

FILED  
Apr 22, 2010  
Secretary of State

**Entity Name:** NAGOL PROPERTIES LLC

**Current Principal Place of Business:**

17939 TIMBER VIEW ST  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3232  
BRANDON, FL 33509

**New Mailing Address:**

**FEI Number:** 20-2318072

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CUNNINGHAM, JOHN L  
628 PENN NATIONAL RD  
SEFFNER, FL 33584 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  
Name: GOFF, KERIN  
Address: 17939 TIMBER VIEW ST  
City-St-Zip: TAMPA, FL 33647

Title: MGRM  
Name: GOFF, JASON  
Address: 17939 TIMBER VIEW ST  
City-St-Zip: TAMPA, FL 33647

Title: MGRM  
Name: DULL, DENNIS  
Address: 17939 TIMBER VIEW ST  
City-St-Zip: TAMPA, FL 33647

Title: MGRM  
Name: DULL, KEVIN  
Address: 17939 TIMBER VIEW ST  
City-St-Zip: TAMPA, FL 33647

Title: MGRM  
Name: CUNNINGHAM, JOHN L  
Address: 628 PENN NATIONAL RD.  
City-St-Zip: SEFFNER, FL 33584

Title: MGRM  
Name: CUNNINGHAM, PAMELA C  
Address: 628 PENN NATIONAL RD.  
City-St-Zip: SEFFNER, FL 33584

I hereby 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: KERIN GOFF

M

04/22/2010

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