

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

7/10/2

FILED
Jul 28, 2006 8:00 am
Secretary of State

07-10-2006 90219 001 ***100.00

DOCUMENT # L05000027774

1. Entity Name
NC PROPERTY, LLC



Principal Place of Business
215 N. EOLA DRIVE
ORLANDO, FL 32801

Mailing Address
215 N. EOLA DRIVE
ORLANDO, FL 32801

30012777



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07052006 Chg-LLC CR2E083 (11/05)

City & State

City & State

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HEEKIN, JAMES F JR
215 NORTH EOLA DRIVE
ORLANDO, FL 32801

Name

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

City

FL

Zip Code

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 is typed or printed name of registered agent and not a photocopy

(NOTE: Registered Agent signature required when registering)

DATE

Filing Fee is \$50.00
Due by September 6, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☒ Addition

Managing Member
James F. Heekin, Jr.
215 N. Eola Drive
Orlando, FL 32801

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

TITLE
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☐ Change ☐ Addition

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:

James F. Heekin, Jr.

6/30/06

407843-4600

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

Date

Current Phone #