

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000027945

Entity Name: NEVILLE, LLC

FILED
May 10, 2006
Secretary of State

Current Principal Place of Business:

4401 WINDRUSH DRIVE
NICEVILLE, FL 32578 US

New Principal Place of Business:

4400 WINDLAKE DRIVE
NICEVILLE, FL 32578 US

Current Mailing Address:

4401 WINDRUSH DRIVE
NICEVILLE, FL 32578 US

New Mailing Address:

4400 WINDLAKE DRIVE
NICEVILLE, FL 32578 US

FEI Number: 20-2644151 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:

HINES, MELISSA A
4401 WINDRUSH DRIVE
TALLAHASSEE, FL 32578 US

Name and Address of New Registered Agent:

HINES, MELISSA A
4400 WINDLAKE DRIVE
NICEVILLE, FL 32578 US

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: MELISSA A HINES

05/10/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MS. () Change (X) Addition
Name: HINES, MELISSA A
Address: 4400 WINDLAKE DR.
City-St-Zip: NICEVILLE, FL 32578 US

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: MELISSA A. HINES

MS

05/10/2006

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