

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000043978

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** NICMAR PROPERTIES, LLC

**Current Principal Place of Business:**

200 MICHAEL DRIVE  
ST. AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

200 MICHAEL DRIVE  
ST. AUGUSTINE, FL 32086

**New Mailing Address:**

**FEI Number:** 20-2784375

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

QUINNEY, BOB  
200 MICHAEL DRIVE  
ST. AUGUSTINE, FL 32086 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: BACK, NICOLE  
Address: 13313 DANUBE LANE  
City-St-Zip: ROSEMOUNT, MN 55068

Title: MGRM  
Name: QUINNEY, MARCEY B  
Address: 200 MICHAEL DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: MGRM  
Name: CARLSON, ALYSSA M  
Address: 408 SUMMERFIELD DRIVE  
City-St-Zip: CHANHASSEN, MN 55317

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: NICOLE BACK

MGRM

02/16/2010

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