

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062081

FILED
Apr 29, 2008
Secretary of State

Entity Name: NC INVESTMENT GROUP I, LLC

Current Principal Place of Business:

12855 SW 132ND STREET
SUITE 200
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

12855 SW 132ND ST. SUITE 200
MIAMI, FL 33186

New Mailing Address:

FEI Number: 20-3044090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REARDON, ERIC T
12855 SW 132ND STREET
SUITE 200
MIAMI, FL 33186 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 () Delete
Name: REARDON, ERIC T
Address: 13131 SW 132ND STREET, SUITE 202
City-St-Zip: MIAMI, FL 33186 US

Title: MGRM () Delete
Name: GONZALEZ, ORESTES E
Address: 1502 LISBON
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM () Delete
Name: SCOTT, MCLACHLAN
Address: 1805 COREY ROAD
City-St-Zip: MALABAR, FL 32950 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: REARDON, ERIC T
Address: 12855 SW 132 STREET SUITE 200
City-St-Zip: MIAMI, FL 33186 US

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 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: ERIC T REARDON

MGMR

04/29/2008

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