2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 24, 2008
Secretary of State

DOCUMENT# L05000081797

Entity Name: NCD 1, LLC

Current Principal Place of Business:

1983 CENTRE POINTE BOULEVARD
SUITE 200
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 12500
TALLAHASSEE, FL 323172500 US

New Mailing Address:

FEI Number: 76-0799393 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHWARTZ, GEOFFREY B
1983 CENTRE POINTE BOULEVARD
SUITE 200
TALLAHASSEE, FL 32308 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:	SCHWARTZ, GEOFFREY B	
Address:	1983 CENTRE POINTE BLVD., STE. 200	
City-St-Zip:	TALLAHASSEE, FL 32308 US	
Title:	MGRM	( ) Delete
Name:	HUEY, MICHAEL -	
Address:	301 S. BRONOUGH STREET. SUITE 600	
City-St-Zip:	TALLAHASSEE, FL 32301	

ADDITIONS/CHANGES:

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: GEOFFREY B. SCHWARTZ MGRM 03/24/2008

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