2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# L05000086614

Entity Name: NEEDLE NIPPER, LLC

Current Principal Place of Business:

1249 JOURNEYS END LANE
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

1249 JOURNEYS END LANE
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 20-4530234 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INTREPID REGISTERED AGENT SERVICES, LLC
ONE INDEPENDENT DRIVE, SUITE 1200
JACKSONVILLE, FL 32202 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: ( ) Delete
Name:
Address:
City-St-Zip:

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

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

ADDITIONS/CHANGES:

Title: P ( ) Change (X) Addition
Name: HOFFMAN, MARK P
Address: 12314 BRADY MANOR WAY
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: V ( ) Change (X) Addition
Name: WETTSTEIN, ROYCE V
Address: 1249 JOURNEYS END LANE
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: V ( ) Change (X) Addition
Name: MESSER, ED V
Address: 926 9TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250 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: ROYCE WETTSTEIN V 04/28/2006

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