2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000105314

TITLE

NAME STREET ADDRESS CHY-ST-ZP TITLE

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP

NASSAU DIAMOND SHOWROOM, LLC



Principal Place of Business

Mailing Address

1743 SOUTH EIGHTH STREET FERNANDINA BEACH, FL 32034 1743 SOUTH EIGHTH STREET FERNANDINA BEACH, FL 32034

FILED Apr 19, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03282007 No Chg-LLC	CR2E083 (11/05)	
4. FEI Number		Appliea For
06-1758087		Not Applicable
5. Certificate of Status Desired	\$5.00 Additional	

Fee Required

6. Name and Address of Current Registered Agent

HATCHELL, GARY C 1743 SOUTH EIGHTH STREET FERNANDINA BEACH, FL 32034

DO NOT WRITE IN THIS SPACE

8. The above the obliga	e named entity submits this statement for the purpose of chartons of registered agent.	anging its registered office or registered agent, or both, in th	e State of Florida. I am familiar with, and accept
SIGNATURE.			
	Signature, typed or printed name of registered agent and tipe if apprecable.	(NOTE: Registered Agent signature required when reinstating)	DATÉ
9.	MANAGING MEMBERS/MANAGERS		
TITLE	CFO		
NAME	HATCHELL, SHARON K MGRM		
STREET ADDRESS	95471 CAPTAIN'S WAY		
CITY-ST-ZIP	AMELIA ISLAND, FL 32054		

U00000718172 05/01/07-80012-003 50.00

MAME STREET ADDRESS DO NOT WRITE CiTY-ST-ZP TITLE IN THIS SPACE STREET ADDRESS

11. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate ano that my signature shall have the same legal offect 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: A OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE