

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000118626

Entity Name: BRISTOL NASSAU, LLC

FILED
Jul 02, 2007
Secretary of State

Current Principal Place of Business:

86002 CHRISTIAN WAY
YULEE, FL 32097

New Principal Place of Business:

Current Mailing Address:

86002 CHRISTIAN WAY
YULEE, FL 32097

New Mailing Address:

FEI Number: 20-3924332 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MCCRANIE, DANIEL I JR
86002 CHRISTIAN WAY
YULEE, FL 32097 US

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: MGR () Delete
Name: MCCRANIE, DANIEL I JR.
Address: 86002 CHRISTIAN WAY
City-St-Zip: YULEE, FL 32097

Title: MGR () Delete
Name: CLAXTON, EDWARD
Address: 1027 BARNWELL RD
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGR () Delete
Name: MCCRANIE, DANIEL I SR
Address: 1027 GERBING RD
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DANIEL MCCRANIE, JR

MGR

07/02/2007

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