2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000049133

Entity Name: NELSON 1622, LLC

FILED Feb 06, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

400 CIRCLE DRIVE 1622 HICKMAN ROAD POMPANO BEACH, FL 33062 JACKSONVILLE, FL 32216

Current Mailing Address: New Mailing Address:

400 CIRCLE DRIVE 1622 HICKMAN ROAD POMPANO BEACH, FL 33062 JACKSONVILLE, FL 32216

FEI Number: 52-2391982 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BENTZ, LEO L ESQ
980 NORTH FEDERAL HIGHWAY STE 412
9995 GATE PARKWAY NORTH
BOCA RATON, FL 33432 US
SUITE 190
JACKSONVILLE, FL 32246 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: LINDSEY C. BROCK, III 02/06/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 NELSON, JOANNE
 Name:
 NELSON, JOHN L

 Address:
 400 CIRCLE DRIVE
 Address:
 3946 MUIRFIELD BLVD E

 City-St-Zip:
 POMPANO BEACH, FL 33062
 City-St-Zip:
 JACKSONVILLE, FL 32225

Title: () Delete Title: MGRM () Change (X) Addition

 Name:
 Name:
 NELSON, ERIKA P

 Address:
 3946 MUIRFIELD BLVD E

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32225

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: JOHN L. NELSON MGR 02/06/2008