

FILED
May 22, 2007 8:00 am
Secretary of State

04-09-2007 90358 001 ****16.66

04-09-2007 90358 002 ****33.34

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L06000053503			
1. Entity Name NDC PARTNERS, LLC			
Principal Place of Business 1001 THIRD AVENUE W., STE 600 BRADENTON, FL 34205		Mailing Address 1001 THIRD AVENUE W., STE 600 BRADENTON, FL 34205	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 20-4955922		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent BLALOCK, WALTERS, HELD & JOHNSON, P.A. 802-11TH STREET WEST BRADENTON, FL 34205		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE			
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
☐ Delete		☐ Change ☒ Addition	
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☐ Delete		☐ Change ☒ Addition	
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☐ Delete		☐ Change ☒ Addition	
11. I hereby 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 and that my 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 606, Florida Statutes.			
SIGNATURE: <u>Kathleen Bellino</u> Kathleen Bellino 3/29/07 412-578-7828			
SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #			

* Per verbal instructions from the
Annual Report Section.