

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000053989

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** NESBIT LLC

**Current Principal Place of Business:**

7995 MAHOGANY RUN LANE  
NAPLES, FL 34113

**New Principal Place of Business:**

**Current Mailing Address:**

7995 MAHOGANY RUN LANE  
NAPLES, FL 34113

**New Mailing Address:**

**FEI Number:** 20-4934217

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORRIS, WILLIAM G  
247 N COLLIER BLVD  
SUITE 202  
MARCO ISLAND, FL 34145 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:** P  
**Name:** BOFF, JOSEPH D  
**Address:** 7995 MAHOGANY RUN LANE  
**City-St-Zip:** NAPLES, FL 34113

**Title:** VP  
**Name:** BOBROW, JOEL I  
**Address:** 7995 MAHOGANY RUN LANE  
**City-St-Zip:** NAPLES, FL 34113

**Title:** T  
**Name:** BOBROW, JOEL I  
**Address:** 7995 MAHOGANY RUN LANE  
**City-St-Zip:** NAPLES, FL 34113

**Title:** S  
**Name:** DE LANGE, BIRGIT  
**Address:** 7995 MAHOGANY RUN LANE  
**City-St-Zip:** NAPLES, FL 34113

I hereby 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:** JOEL BOBROW

T

02/08/2012

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