

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000056118

**FILED**  
**Apr 30, 2007**  
**Secretary of State**

**Entity Name:** NKS BUSINESS RESOURCES, LLC

**Current Principal Place of Business:**

100 CIRCUIT ROAD  
SUITE B  
NOKOMIS, FL 34275

**New Principal Place of Business:**

**Current Mailing Address:**

100 CIRCUIT ROAD  
SUITE B  
NOKOMIS, FL 34275

**New Mailing Address:**

**FEI Number:** 20-4973807

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILSON, MICHAEL J  
200 SOUTH ORANGE AVE.  
SARASOTA, FL 34236 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:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

**ADDITIONS/CHANGES:**

**Title:** MGR ( ) Change (X) Addition  
**Name:** NELSON, ROBERT O PRES  
**Address:** 100 CIRCUIT ROAD, SUITE B  
**City-St-Zip:** NOKOMIS, FL 34275

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:** ROBERT O. NELSON

MGR

04/30/2007

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