2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2007 8:00 am
Secretary of State
02-28-2007 90149 038 ****55.00

DOCUMENT # L06000083689

1. Entity Name
NATURE COAST RESCREENING LLC

Principal Place of Business
8273 NORMLEE ROAD
WEEKI WACHEE FL 34613

Mailing Address
8273 NORMLEE ROAD
WEEKI WACHEE FL 34613

2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

City & State

Zip | Country

01252007 Chg-LLC CR2E083 (12/06)

4. FEI Number 22-3942085 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

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 ______

Filing Fee is $50.00
Due by May 1, 2007

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

	MGR BRAY, STEVEN B 8273 NORMLEE ROAD WEEKI WACHEE, FL 34613	☐ Delete
	ST BRAY, STEVEN B 8273 NORMLEE ROAD WEEKI WACHEE, FL 34613	☐ Delete
		☐ Delete
		☐ Delete
		☐ Delete
		☐ Delete

10. ADDITIONS/CHANGES

		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ 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 608, Florida Statutes.

SIGNATURE: Steven Blake Bray