

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000085515

Entity Name: NCT-104, LLC

**FILED**  
**Mar 03, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

1408 NORTH WEST SHORE BLVD. STE 504  
TAMPA, FL 336222774

## **New Principal Place of Business:**

4401 W. KENNEDY BLVD  
3RD FLR  
TAMPA, FL 33609

## **Current Mailing Address:**

1408 NORTH WEST SHORE BLVD. STE 504  
TAMPA, FL 336222774

## **New Mailing Address:**

P.O. BOX 22774  
TAMPA, FL 336222774

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

NCF CORPORATION  
1408 NORTH WEST SHORE BLVD. STE 504  
TAMPA, FL 336222774 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: MANA  
Name: CARPENTER, ANDY  
Address: PO BOX 8682  
City-St-Zip: MOSS POINT, MS 39563

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: ANDY CARPENTER

MANA

03/03/2011

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