

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000110013

Entity Name: NC & AC ASSOCIATES, LLC

FILED
Mar 21, 2009
Secretary of State

Current Principal Place of Business:

2900 GLADES CIR STE 850
WESTON, FL 33327

New Principal Place of Business:

1940 ASPEN LANE
WESTON, FL 33327

Current Mailing Address:

2900 GLADES CIR STE 850
WESTON, FL 33327

New Mailing Address:

1940 ASPEN LANE
WESTON, FL 33327

FEI Number: 20-5886340

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRICEFFO, RAUL
2900 GLADES CIR STE 850
WESTON, FL 33327 US

Name and Address of New Registered Agent:

BRICENO, RAUL
1940 ASPEN LANE
WESTON, FL 33327 US

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: RAUL BRICENO

03/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CANELLA, ADRIANA
Address: 2900 GLADES CIR STE 850
City-St-Zip: WESTON, FL 33327

Title: MGR () Delete
Name: CALLAOS, NAJIB
Address: 2900 GLADES CIR STE 850
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CANELLA, ADRIANA
Address: 1940 ASPEN LANE
City-St-Zip: WESTON, FL 33327

Title: MGR (X) Change () Addition
Name: CALLAOS, NAJIB
Address: 1940 ASPEN LANE
City-St-Zip: WESTON, FL 33327

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: NAJIB CALLAOS

MGR

03/21/2009

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