

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000024468

Entity Name: NMS PROPERTIES, LLC

FILED
Apr 13, 2009
Secretary of State

Current Principal Place of Business:

28361 LILY STREET NW
ISANTI, MN 55040 US

New Principal Place of Business:

Current Mailing Address:

28361 LILY STREET NW
ISANTI, MN 55040 US

New Mailing Address:

28361 LILY STREET NW
ISANTI, MN 55040

FEI Number: 20-8630439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HJP FINANCIAL SERVICES
4458 CLEVELAND AVE
FORT MYERS, FL 33901 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: MGRM () Delete
Name: STOECKEL, NEIL
Address: 28361 LILY STREET NW
City-St-Zip: ISANTI, MN 55040

Title: MGRM (X) Delete
Name: STOECKEL, MARCELLA L
Address: 28361 LILY STREET NW
City-St-Zip: ISANTI, MN 55040

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STOECKEL, MARCELLA L
Address: 28361 LILY STREET NW
City-St-Zip: ISANTI, MN 55040

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PATRICK MOORE

AGT

04/13/2009

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