

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000112285

**FILED**  
**Jan 12, 2012**  
**Secretary of State**

**Entity Name:** NATIONAL INSPECTION AND CONSULTANTS, LLC

**Current Principal Place of Business:**

9911 BAVARIA ROAD  
FORT MYERS, FL 339138510

**New Principal Place of Business:**

**Current Mailing Address:**

9911 BAVARIA ROAD  
FORT MYERS, FL 339138510

**New Mailing Address:**

**FEI Number:** 59-2134161

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

VIGNE, ROBERT A  
9911 BAVARIA ROAD  
FORT MYERS, FL 339138510 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  
**Name:** VIGNE, ROBERT A  
**Address:** 9911 BAVARIA ROAD  
**City-St-Zip:** FORT MYERS, FL 33913 US

**Title:** MGRM  
**Name:** VIGNE, DAVID J  
**Address:** 9911 BAVARIA ROAD  
**City-St-Zip:** FORT MYERS, FL 33913 US

**Title:** MGRM  
**Name:** VIGNE, RICHARD U  
**Address:** 9911 BAVARIA ROAD  
**City-St-Zip:** FORT MYERS, FL 33913 US

**Title:** MGRM  
**Name:** SHIELDS, JOHN C  
**Address:** 9911 BAVARIA ROAD  
**City-St-Zip:** FORT MYERS, FL 33913 US

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:** ROBERT A VIGNE

MGRM

01/12/2012

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