

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002074

Entity Name: THE NANSHE GROUP, LLC

FILED  
Aug 25, 2008  
Secretary of State

**Current Principal Place of Business:**

1693 WINTERHILL COURT  
MONTGOMERY, IL 60538

**New Principal Place of Business:**

**Current Mailing Address:**

1693 WINTERHILL COURT  
MONTGOMERY, IL 60538

**New Mailing Address:**

FEI Number: 31-1726835      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

TARR, SCOTT R MGRM  
940 W OAKLAND AVE  
SUITE A-9  
OAKLAND, FL 34787 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: MGR ( ) Delete  
Name: EUCKER, SCOTT R  
Address: 1693 WINTERHILL COURT  
City-St-Zip: MONTGOMERY, IL 60538

Title: MGRM ( ) Delete  
Name: TARR, SCOTT R  
Address: 940 W OAKLAND AVE SUITE A-9  
City-St-Zip: OAKLAND, FL 34787

**ADDITIONS/CHANGES:**

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

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: SCOTT EUCKER

MGR

08/25/2008

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