## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

J. ..

## FILED Mar 27, 2006 08:00 AM Secretary of State

ANNUAL REPORT						Secretary of State				
DOCUMENT # M0400000144  1. Entity Name  NATIONAL DEVELOPMENT SERVICES LLC							ury (	)	ucc	
NATIONAL DEVELOPMENT SERVICES LLC										
Principal Place of Business Mailing Address 2536 COUNTRYSIDE BLVD., 6TH FLOOR 2536 COUNTRY. CLEARWATER, FL 33763 CLEARWATER, F			TRYSIDE BLVD., 6TH FLOOR							
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01252006	Chg-LLC	CR2E08	3 (11/05)			
City & State		City & State		4. FEI Numb			<b> -</b>	plied For standard		
Ζὶρ	Country	Ζφ	Coun	try	5. Certificate	s of Status Desired		5.00 Add		
	6. Name and Address of Current I	Registered Agent			7. Name and	d Address of New Re	istered A	ent		
NODTH T	78.4			Name					{	
NORTH, TIM 2536 COUNTRYSIDE BLVD., 6TH FLOOR CLEARWATER, FL 33763			Street Address (P.O. Box Number is Not Acceptable)							
				City			FL	Zip Code	ī (	
8. 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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when renstating)  OATE										
		<u> </u>								
Filing Fee is \$50.00 Due by May 1, 2006							check pa Departme	yable to nt of State	•	
9.	MANAGING MEMBERS/MANAGERS 10.					ADDITIONS/C	HANGES			
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11. Thereby	L	this filing does not quality to	r the exe	motions contained	in Chanter 119	Florida Statutes 1 fun	her certify	het the into	mation	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes 1 further certify that the information indicated on this report is true and accurate and that my 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 508, Florida Statutes.										