


2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # M04000000921 1. Entity Name NHI PROPERTIES LLC	
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Principal Place of Business 2800 SOUTHCROSS DRIVE WEST BURNSVILLE, MN 55306	Mailing Address 2800 SOUTHCROSS DRIVE WEST BURNSVILLE, MN 55306
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DO NOT WRITE IN THIS SPACE



04242007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0805540	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CFRA, LLC
CORPORATE CENTER THREE AT INT'L PLAZA
4221 W. BOY SCOUT BLVD, 10TH FLOOR
TAMPA, FL 33607-5736**

**DO NOT WRITE
IN THIS SPACE**

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 re/instating) DATE _____

Filing Fee is \$50.00
Due by May 1, 2007

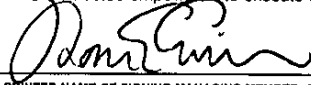
U000000738556
05/11/07-80071-019 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KOTULA, DONALD L 2800 SOUTHCROSS DRIVE WEST BURNSVILLE, MN 55306
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I 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 608, Florida Statutes.

SIGNATURE:  **Thomas Erickson** 4/24/07 (952) 894-9510
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #