

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 21, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # M06000001310**

1. Entity Name  
**NENR INVESTMENTS, LLC**



Principal Place of Business  
**207-29TH AVENUE, NORTH  
NASHVILLE, TN 37203**

Mailing Address  
**207-29TH AVENUE, NORTH  
NASHVILLE, TN 37203**



02132007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**62-1758546**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**LARSH, DAWN E  
11714 EMERALD COAST PKWY, SUITE 5  
MIRAMAR BEACH, FL 32550**

**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 reinstating) DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
WALLIS, WILLIAM G JR  
207-29TH AVENUE, NORTH  
NASHVILLE, TN 37203**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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03/01/07-80045-011 50.00

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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 William G. Wallis, Jr. **WILLIAM G. WALLIS, Jr.** 2-19-07 615-251-3118  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #