2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# M06000004126

Entity Name: NRS VENTURES, L.L.C.

Current Principal Place of Business:

9690 DEERECO ROAD, SUITE 100
TIMONIUM, MD 21093

New Principal Place of Business:

200 INTERNATIONAL CIRCLE #3500
HUNT VALLEY, MD 21030

Current Mailing Address:

9690 DEERECO ROAD, SUITE 100
TIMONIUM, MD 21093

New Mailing Address:

200 INTERNATIONAL CIRCLE #3500
HUNT VALLEY, MD 21030

FEI Number: 36-4236118 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 ( ) Delete
Name: OMEGA HEALTHCARE INV, ESTORS, INC
Address: 9690 DEERECO ROAD, SUITE 100
City-St-Zip: TIMONIUM, MD 21093

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: OMEGA HEALTHCARE INV, ESTORS, INC
Address: 200 INTERNATIONAL CIRCLE #3500
City-St-Zip: HUNT VALLEY, MD 21030

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: ROBERT O. STEPHENSON TRES 03/20/2009

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