

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003471

FILED  
Jan 05, 2010  
Secretary of State

Entity Name: NBK BASEBALL GROUP LLC

**Current Principal Place of Business:**

1725 MAIN STREET, STE 211  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1725 MAIN STREET, STE 211  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 38-3741022

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BENTZ, DIEGO  
1721 MAIN STREET, STE 211  
WESTON, FL 33326 US

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

BENTZ, DIEGO  
1725 MAIN STREET, STE 211  
WESTON, FL 33326 US

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:

01/05/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ASTACIO, FITZGERALD  
Address: 1725 MAIN STREET, STE 211  
City-St-Zip: WESTON, FL 33326

Title: MGR  
Name: BENTZ, DIEGO  
Address: 1725 MAIN STREET, STE 211  
City-St-Zip: WESTON, FL 33326

Title: MGR  
Name: COURTRIGHT, JOHN  
Address: 1725 MAIN STREET, STE 211  
City-St-Zip: WESTON, FL 33326

Title: MGR  
Name: CUZA, FERNANDO  
Address: 426 E MACEWEN DRIVE  
City-St-Zip: OSPREY, FL 342299235

Title: MGR  
Name: MILCHIN, MICHAEL  
Address: 13651 GLYNSHEL DRIVE  
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGR  
Name: PIEPER, MARK  
Address: 400 SKOKIE BOULEVARD STE 280  
City-St-Zip: NORTHBROOK, IL 60062

I hereby 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: MARK PIEPER

MGR

01/05/2010

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