

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002395

Entity Name: 2210 ARIELLE DR., LLC

FILED
Jul 03, 2006
Secretary of State

Current Principal Place of Business:

800 FIFTH AVENUE SOUTH
SUITE 203
NAPLES, FL 34102

New Principal Place of Business:

5780 TAYLOR RD
SUITE 1
NAPLES, FL 34109

Current Mailing Address:

800 FIFTH AVENUE SOUTH
SUITE 203
NAPLES, FL 34102

New Mailing Address:

5780 TAYLOR RD
SUITE 1
NAPLES, FL 34109

FEI Number: 65-1075611 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WOOD, DOUGLAS A ESQ.
1000 TAMiami TRAIL NORTH, SUITE 201
NAPLES, FL 34102 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MINKER, CLARK
Address: 710 YORKLYN ROAD
City-St-Zip: HOCKESSIN, DE 19707

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MINKER, CLARK
Address: 5780 TAYLOR RD, SUITE 1
City-St-Zip: NAPLES, FL 34109 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CLARK T MINKER

MNGR

07/03/2006

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