

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000006766

FILED
Apr 28, 2004
Secretary of State

Entity Name: D & A DEVELOPMENT OF NAPLES, L.L.C.

Current Principal Place of Business:

2259 TRADE CENTER WAY
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

2259 TRADE CENTER WAY
NAPLES, FL 34109

New Mailing Address:

FEI Number: 59-3720810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WANDERON, THOMAS
868 106TH AVENUE NORTH
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

BAVIELLO, MICHAEL A JR.
1025 FIFTH AVENUE NORTH
NAPLES, FL 34102

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: MICHAEL A. BAVIELLO, JR.

04/28/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: D () Delete
Name: DINORICA, DONATO
Address: 5340 14TH AVENUE SW
City-St-Zip: NAPLES, FL 34116

Title: D () Delete
Name: DINORCIA, ANTHONY SR
Address: 4121 3RD AVE SW
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DINORICA, DONATO
Address: 6820 HUNTERS ROAD
City-St-Zip: NAPLES, FL 34109

Title: MGRM (X) Change () Addition
Name: DINORCIA, ANTHONY JR
Address: 1959 TRADE CENTER WAY
City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONATO DINORCIA

MGRM

04/28/2004

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