2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000021163

Entity Name

NEAPOLITAN ENTERPRISES LLC



FILED
Jul 18, 2008 08:00 AM
Secretary of State

Principal Place of Business

255 13TH AVENUE SOUTH, SUITE 202 NAPLES, FL 34102 Mailing Address

255 13TH AVENUE SOUTH, SUITE 202 NAPLES, FL 34102



DO NOT WRITE IN THIS SPACE

07072008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
65-6393793 Applied For
Not Applicable

5. Certificate of Status Desired Fee Required

239-261.8936

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE AND TYPED OR PRINTED

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.						
SIGNATURE_	Signature, typed or printed name of registered agent an	nd little if applicable.	(NOTE, Registered A	on: signature required when reinstating)	DATE	
FILE NOWIII FEE IS \$138.75 Due by September 12, 2008 In accordance with s. 607.19 liability company did not rece				(2)(b), F.S., the limited		
9.	MANAGING MEMBER	•	·	•	1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOBIN, JOAN F 2434 BELMONT RD. N.W. WASHINGTON, DC 20008	•	,	,		
TITLE NAME STREET ADDRESS CITY-ST-2IP	MGRM WALKER, BARBARA Z 4324 WESTOVER PL. N.W. WASHINGTON, DC 20016				00000095551: 07/18/08-80001	3 -005 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	IN T	HIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS					;	

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 mustee empowered to execute this report as required by Chapter 608, Florida Statutes.

NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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