


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 01, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000039570
 1. Entity Name
 PIPER'S CROSSING, LLC



Principal Place of Business: 2375 TAMiami TRAIL NORTH, STE. 208C NAPLES, FL 34103
 Mailing Address: % CRIFASI ENTERPRISES, INC. 2375 TAMiami TRAIL NORTH STE 208C NAPLES, FL 34103

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01042005 No Chg-LLC CR2E083 (10/03)
 4. FEI Number 51-0444861 Applied For Not Applicable
 5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 CRIFASI ENTERPRISES, INC.
 2375 TAMiami TRAIL NORTH, STE. 208C
 NAPLES, FL 34103

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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 the obligations of registered agent.
 SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CRIFASI, JACK
STREET ADDRESS	2375 TAMiami TRAIL NORTH, STE. 208C
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify 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 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:  1/13/05 239-594-7000
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #