## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000045284

Entity Name: NORTHBROOKE PROFESSIONAL VILLAGE, LLC

**FILED** Mar 26, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

12810 TAMIAMI TRAIL NORTH ONE TOWNE SQUARE

NAPLES, FL 34110 SUITE 1600

DETROIT, MI 48076

**Current Mailing Address: New Mailing Address:** 

12810 TAMIAMI TRAIL NORTH ONE TOWNE SQUARE NAPLES, FL 34110

SUITE 1600 DETROIT, MI 48076

FEI Number: 20-0438246 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

GATES, TODD E JOSEPH, MICHAEL A

12810 TAMIAMI TRAIL NORTH 999 VANDERBILT BEACH ROAD

NAPLES, FL 34110 SUITE 610 NAPLES, FL 34108 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: MICHAEL A JOSEPH 03/26/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: (X) Change ( ) Addition () Delete

GATES, TODD E WATCHOWSKI, DALE Name: Name: Address: 12810 TAMIAMI TRAIL NORTH Address: ONE TOWNE SQUARE, SUITE 1600

City-St-Zip: NAPLES, FL 34110 City-St-Zip: DETROIT, MI 48076

Title: MGR () Delete Title: () Change () Addition

Name: STOCK, BRIAN K Name: Address: 2647 PROFESSIONAL CIRCLE SUITE 1201 Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

CRAWFORD, RICHARD S Name: Name: 999 VANDERBILT BEACH RD SUITE 610 Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DALE WATCHOWSKI 03/26/2009