

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000012932

Entity Name: GBM OF NAPLES, LLC

FILED
May 26, 2005
Secretary of State

Current Principal Place of Business:

188 TOPANGA DR.
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

188 TOPANGA DR.
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 20-0767322 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:

VLAHOVIC, KATHRYN
188 TOPANGA DRIVE
BONITA SPRINGS, FL 34134 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/MEMBERS:

Title: MGR () Delete
Name: VLAHOVIC, KATHRYN
Address: 188 TOPANGA DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGRM () Delete
Name: LICUL, MILAN
Address: 141 WEST 38TH STREET C/OARNO REST.
City-St-Zip: NEW YORK, NY 10018

Title: MGRM () Delete
Name: TURCINOVIC, BRANKO
Address: 3 MESA ROAD
City-St-Zip: SYOSSET, NY 11791

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KATHRYN VLAHOVIC

MGRM

05/26/2005

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