

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053682

FILED  
Apr 29, 2010  
Secretary of State

**Entity Name:** FIVE COUPLES ST PETE'S # 105, LLC

**Current Principal Place of Business:**

11550 ROYAL TEE CIRCLE  
CAPE CORAL, FL 33991 US

**New Principal Place of Business:**

**Current Mailing Address:**

11550 ROYAL TEE CIRCLE  
CAPE CORAL, FL 33991 US

**New Mailing Address:**

FEI Number: 20-4932148

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FIOLA, LOUIS A  
11550 ROYAL TEE CIRCLE  
CAPE CORAL, FL 33991 US

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

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/MANAGERS:**

Title: MGRM  
Name: FIOLA, LOUIS A  
Address: 11550 ROYAL TEE CIRCLE  
City-St-Zip: CAPE CORAL, FL 33991 US

Title: MGRM  
Name: TAYLOR, CLIFFORD  
Address: 414 SE 21ST STREET  
City-St-Zip: CAPE CORAL, FL 33990 US

Title: MGRM  
Name: VACCA, MICHAEL  
Address: 26 W NORTON DRIVE  
City-St-Zip: SOUTHAMPTON, PA 18966 US

Title: MGRM  
Name: COCCIA, VINCENT  
Address: 13042 RICHWOOD ROAD  
City-St-Zip: PHILADELPHIA, PA 19116 US

Title: MGRM  
Name: FIOLA, ANTHONY J  
Address: 750 CARPENTER STREET  
City-St-Zip: GLASSBORO, NJ 08028 US

I hereby 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: LOUIS A FIOLA

MGRM

04/29/2010

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