

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000057626

Entity Name: 5099 CASTLEROCK, LLC

FILED  
Apr 22, 2009  
Secretary of State

**Current Principal Place of Business:**

5099 CASTLEROCK WAY  
NAPLES, FL 34112

**New Principal Place of Business:**

**Current Mailing Address:**

5099 CASTLEROCK WAY  
NAPLES, FL 34112

**New Mailing Address:**

FEI Number: 20-5216917

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AARON A. FARMER, P.L.  
999 VANDERBILT BEACH ROAD  
SUITE 606  
NAPLES, FL 34102 US

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

AARON A. FARMER, P.L.  
999 VANDERBILT BEACH ROAD  
SUITE 606  
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:

04/22/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: COTTHAM, EDITH  
Address: 5099 CASTLEROCK WAY  
City-St-Zip: NAPLES, FL 34112

Title: MGR ( ) Delete  
Name: COTTHAM, GEORGE WILLIAM  
Address: 5099 CASTLEROCK WAY  
City-St-Zip: NAPLES, FL 34112

**ADDITIONS/CHANGES:**

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 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: GEORGE WILLIAM COTTHAM

MGR

04/22/2009

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