

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000028196

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** NAPLES STRATEGIC BUSINESS PARTNERS LLC

**Current Principal Place of Business:**

5678 LAGO VILLAGGIO WAY  
NAPLES, FL 34104 US

**New Principal Place of Business:**

696 LAMBTON LN  
NAPLES, FL 34104 US

**Current Mailing Address:**

5678 LAGO VILLAGGIO WAY  
NAPLES, FL 34104 US

**New Mailing Address:**

696 LAMBTON LN  
NAPLES, FL 34104 US

**FEI Number:** 27-4077240

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHEVALIER, SYLVAIN  
5678 LAGO VILLAGGIO WAY  
NAPLES, FL 34104 US

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

CHEVALIER, SYLVAIN  
696 LAMBTON LN  
NAPLES, FL 34104 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

01/04/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: S. & M.B. CHEVALIER TRUST  
Address: 696 LAMBTON LN  
City-St-Zip: NAPLES, FL 34104 US

Title: MGRM  
Name: TYMANN, JOHN T  
Address: 8990 BAY COLONY DRIVE, SUITE 1201  
City-St-Zip: NAPLES, FL 34108 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: SYLVAIN CHEVALIER

MGRM

01/04/2012

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