## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M05000003004

Entity Name: NNN NAPLES LAUREL OAK 2, LLC

FILED Apr 27, 2007 Secretary of State

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

1551 N.TUSTIN AVE., SUITE 200 SANTA ANA, CA 92705

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

1551 N.TUSTIN AVE., SUITE 200 SANTA ANA, CA 92705

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

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

NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DRIVE, SUITE 4 WESTON, FL 33331

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:

ADDITIONS/CHANGES:

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

DEUTCH FAMILY LIMITE, D PARTNERSHIP A GENCY DEUTCH FAMILY LIMITE, D PARTNERSHIP A GENCY Name: Name: Address: 100 N. MINNESOTA STREET Address: 2223 155TH ST.

City-St-Zip: NEW ULM, MN 56073 City-St-Zip: CAMERON, IL 61423

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

Name: TRIPLE NET PROPERTIE, S, LLC. Name: Address: 1551 NORTH TUSTIN AVENUE SUITE 200 Address: City-St-Zip: SANTA ANA, CA 92705 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: THOMAS DEUTSCH **MGRM** 04/27/2007