

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009422

Entity Name: GAWN FISHIN', LLC

FILED  
May 17, 2006  
Secretary of State

## Current Principal Place of Business:

2950 TAMIAMI TRAIL N  
SUITE 16  
NAPLES, FL 34103

## New Principal Place of Business:

## Current Mailing Address:

2950 TAMIAMI TRAIL N  
SUITE 16  
NAPLES, FL 34103

## New Mailing Address:

FEI Number: 82-0589719      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:

KYRITSIS, ATHINA  
2950 TAMIAMI TRAIL N. STE 16  
NAPLES, FL 34103      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      (X) Delete  
Name: KYRITSIS, ATHINA  
Address: 9240 BONITA BEACH RD 2206  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM      ( ) Delete  
Name: GREKOS, ZANNOS  
Address: 2950 TAMIAMI TRAIL N STE 16  
City-St-Zip: NAPLES, FL 34103

Title: MGRM      ( ) Delete  
Name: KYRITSIS, ATHINA  
Address: 2950 TAMIAMI TRAIL N STE 16  
City-St-Zip: NAPLES, FL 34103

## 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 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: ATHINA KYRITSIS

MGRM

05/17/2006

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