

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000048964

**FILED**  
**Mar 05, 2007**  
**Secretary of State**

**Entity Name:** COLLIER COUNTY PRESSURE CLEANING, LLC

**Current Principal Place of Business:**

601 93RD AVENUE NORTH  
NAPLES, FL 33963

**New Principal Place of Business:**

601 93RD AVENUE NORTH  
NAPLES, FL 34108

**Current Mailing Address:**

601 93RD AVENUE NORTH  
NAPLES, FL 33963

**New Mailing Address:**

601 93RD AVENUE NORTH  
NAPLES, FL 34108

**FEI Number:** 20-0435889

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS F. HUDGINS, PLLC  
791 10TH STREET SOUTH, SUITE B  
NAPLES, FL 34102 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: MGR ( ) Delete  
Name: TUCKER, JOHN J  
Address: 601 93RD AVENUE NORTH  
City-St-Zip: NAPLES, FL 33963

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: TUCKER, JOHN J  
Address: 601 93RD AVENUE NORTH  
City-St-Zip: NAPLES, FL 34108

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: JOHN J TUCKER

MGR

03/05/2007

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