

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000048964

FILED  
Mar 18, 2009  
Secretary of State

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

**Current Principal Place of Business:**

601 93RD AVENUE NORTH  
NAPLES, FL 34108

**New Principal Place of Business:**

**Current Mailing Address:**

601 93RD AVENUE NORTH  
NAPLES, FL 34108

**New Mailing Address:**

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:**

THOMAS F. HUDGINS, PLLC  
2800 DAVIS BLVD.  
SUITE 203  
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

03/18/2009

Date

**MANAGING MEMBERS/MANAGERS:**

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

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MGRM ( ) Change (X) Addition  
Name: TUCKER, JOHN P  
Address: 243 WILLOWICK DR.  
City-St-Zip: NAPLES, FL 34110

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: JOHN J. TUCKER

MGRM

03/18/2009

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