## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000059343

Entity Name: PF NAPLES LLC

**FILED** Jan 15, 2020 **Secretary of State** 0511910724CC

## **Current Principal Place of Business:**

197 PORTLAND STREET, 6TH FLOOR

BOSTON, MA 02114

## **Current Mailing Address:**

C/O SCOTT M. TRUE 308 SPIDER LILY LANE NAPLES, FL 34119

FEI Number: 80-0208571 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PIZZUTI, DONATO F 308 SPIDER LILY LN NAPLES, FL 34119 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

Authorized Person(s) Detail:

Title Title MGR **MGRM** 

Name PIZZUTI, LINDA Name BRODIGAN, DONNA P

Address 197 PORTLAND STREET, 6TH FLOOR Address 197 PORTLAND STREET, 6TH FLOOR

City-State-Zip: BOSTON MA 02114-1716 City-State-Zip: BOSTON MA 02114-1716

Title **MGRM** Title MGR

PIZZUTTI. DONATO F Name TRUE, SCOTT M Name

Address 13105 VANDERBILT DR. Address 308 SPIDER LILY LANE

PH-S

City-State-Zip: NAPLES FL 34119 City-State-Zip: NAPLES FL 34110

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**MGR** 

SIGNATURE: SCOTT M. TRUE

Electronic Signature of Signing Authorized Person(s) Detail

01/15/2020

Date