

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000059343

Entity Name: PF NAPLES LLC

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

Date

Authorized Person(s) Detail :

Title MGR
Name PIZZUTI, LINDA
Address 197 PORTLAND STREET, 6TH FLOOR
City-State-Zip: BOSTON MA 02114-1716

Title MGRM
Name BRODIGAN, DONNA P
Address 197 PORTLAND STREET, 6TH FLOOR
City-State-Zip: BOSTON MA 02114-1716

Title MGRM
Name PIZZUTTI, DONATO F
Address 13105 VANDERBILT DR.
PH-S
City-State-Zip: NAPLES FL 34110

Title MGR
Name TRUE, SCOTT M
Address 308 SPIDER LILY LANE
City-State-Zip: NAPLES FL 34119

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.

SIGNATURE: SCOTT TRUE

MGR

01/22/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date