

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000007115

**Entity Name:** 2133 WINKLER, LLC

**Current Principal Place of Business:**

5010 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103

**Current Mailing Address:**

P.O. BOX 8537  
NAPLES, FL 34101 US

**FEI Number:** 26-4093793

**Certificate of Status Desired:** No

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

COMMERCIAL MANAGEMENT OF NAPLES  
5010 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103 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 PISANI, DONATO  
Address 1318 VIA PORTOFINO  
City-State-Zip: NAPLES FL 34108

*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:** DONATO PISANI

**MANAGER**

**03/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date