

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000087079

**Entity Name:** GP NAPLES II, LLC

**Current Principal Place of Business:**

153 SEVILLA AVE.  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1000 E. 80TH PLACE  
SUITE 700 NORTH  
MERRILLVILLE, IN 46410

**FEI Number:** 27-0895532

**Certificate of Status Desired:** No

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

M.J.F. REGISTERED AGENT CORP.  
153 SEVILLA AVE.  
CORAL GABLES, FL 33134 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	PETERMAN, PATRICK
Address	1000 E. 80TH PLACE, SUITE 700 NORTH
City-State-Zip:	MERRILLVILLE IN 46410

Title	MGRM
Name	JOHN AND CATHERINE PETERMAN TRUST # 1
Address	1000 E. 80TH PLACE, SUITE 700 NORTH
City-State-Zip:	MERRILLVILLE IN 46410

*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:** PATRICK PETERMAN

**MGR**

**03/07/2014**

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

\_\_\_\_\_ Date