

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000093884

**Entity Name:** NEAPOLITAN YACHT SERVICES LLC

**Current Principal Place of Business:**

160 4TH STREET  
NAPLES, FL 34113

**Current Mailing Address:**

PO BOX 1195  
NAPLES, FL 34106

**FEI Number:** 45-3183133

**Certificate of Status Desired:** No

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

DURKIN, MICHELE  
160 4TH STREET  
NAPLES, FL 34113 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	Title	MGR
Name	DURKIN, MICHELE	Name	DURKIN, MIKE
Address	PO BOX 1195	Address	PO BOX 1195
City-State-Zip:	NAPLES FL 34106	City-State-Zip:	NAPLES FL 34106

Title MGRM  
 Name CCM BOAT CARE, INC.  
 Address 6800 BOTTLE BRUSH LN  
 City-State-Zip: NAPLES FL 34109

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHELE DURKIN

MGR

02/10/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date