### **2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000114537

Entity Name: PROFESSIONAL FINANCIAL PARTNERS, LLC

FILED Feb 28, 2013 Secretary of State CC5119076309

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

3003 TAMIAMI TRAIL NORTH COLLIER PLACE I SUITE 220 NAPLES, FL 34103

# **Current Mailing Address:**

3003 TAMIAMI TRAIL NORTH COLLIER PLACE I SUITE 220 NAPLES, FL 34103 US

FEI Number: 46-1001373 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

SALVATORI, WOOD & BUCKEL, P.L. 9132 STRADA PLACE, FOURTH FLOOR NAPLES, FL 34108 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 EASTMAN, JAMES C

Address 3003 TAMIAMI TRAIL NORTH

SIGNATURE: JAMES C. EASTMAN

**COLLIER PLACE I SUITE 220** 

City-State-Zip: NAPLES FL 34103

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.

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER 02/28/2013

Date