

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012416

Entity Name: 4099 BUILDING, LLC

FILED  
Apr 26, 2010  
Secretary of State

## Current Principal Place of Business:

3936 TAMIAMI TRAIL NORTH  
SUITE B  
NAPLES, FL 34103

## New Principal Place of Business:

3936 TAMIAMI TRAIL NORTH  
SUITE B  
NAPLES, FL 34103 US

## Current Mailing Address:

3936 TAMIAMI TRAIL NORTH  
SUITE B  
NAPLES, FL 34103

## New Mailing Address:

C/O CAMERON REAL ESTATE SERVICES, INC  
1250 N. TAMIAMI TRAIL #101  
NAPLES, FL 34102 US

FEI Number: 59-3739289

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GISSELBECK, ROBERT P  
3936 TAMIAMI TRAIL NORTH  
SUITE B  
NAPLES, FL 34103 US

## Name and Address of New Registered Agent:

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

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: FREY, EUGENE U  
Address: 3936 TAMIAMI TRAIL NORTH, STE. B  
City-St-Zip: NAPLES, FL 34103

Title: MGR  
Name: MORRISON, JOHN N  
Address: 3936 TAMIAMI TRAIL NORTH, STE. B  
City-St-Zip: NAPLES, FL 34103

Title: MGR  
Name: REILING, WILLIAM S  
Address: 3936 TAMIAMI TRAIL NORTH, STE. B  
City-St-Zip: NAPLES, FL 34103

Title: MGR  
Name: VOGEL, RICHARD M  
Address: 3936 TAMIAMI TRAIL NORTH, STE. B  
City-St-Zip: NAPLES, FL 34103

Title: MGR  
Name: GISSELBECK, ROBERT P  
Address: 3936 TAMIAMI TR. .  
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information indicated on this 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.

SIGNATURE: ROBERT GISSELBECK

MGR

04/26/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date