

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

DOCUMENT # L01000015555

1. Entity Name  
FLORIDA COASTAL PROFESSIONAL CENTER, LLC



Principal Place of Business  
210 MOORINGLINE DRIVE  
NAPLES, FL 34102

Mailing Address  
1250 N TAMIAMI TRL  
# 101  
NAPLES, FL 34102

184  
**FILED**  
**Apr 27, 2007 08:00 AM**  
**Secretary of State**



04172007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3751330	Applied For Not Applicable
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5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

COLEMAN, KEVIN G  
4001 TAMIAMI TRAIL NORTH, STE. 300  
NAPLES, FL 34103

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee Is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TURNER, BERNARD L 210 MOORINGLINE DRIVE NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TURNER, RITA 210 MOORINGLINE DRIVE NAPLES, FL 34102
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05/11/07-80045-008 50.00

**DO NOT WRITE  
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**

*Bernard L Turner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/24/07 239-261-1111

Date

Daytime Phone #