

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000017757

Entity Name: DISCOVER NAPLES LLC

**FILED**  
**Jan 06, 2004**  
**Secretary of State**

**Current Principal Place of Business:**

7645 MEADOW LAKES DRIVE  
#1  
NAPLES, FL 34104

**New Principal Place of Business:**

**Current Mailing Address:**

7645 MEADOW LAKES DRIVE  
#1  
NAPLES, FL 34104

**New Mailing Address:**

FEI Number: 65-1147587

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CASSESE, ROBERT  
666 3RD ST S  
APT 104  
NAPLES, FL 34102 US

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

CASSESE, ROBERT  
7645 MEADOW LAKES DRIVE  
NAPLES, FL 34104 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: ROBERT CASSESE

01/06/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: P ( ) Delete  
Name: CASSESE, ROBERT  
Address: 666 3RD ST S  
City-St-Zip: NAPLES, FL 34102

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CASSESE, ROBERT  
Address: 7645 MEADOW LAKES DRIVE  
City-St-Zip: NAPLES, FL 34104

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 CASSESE

MGR

01/06/2004

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