2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011485

Entity Name: LJP ENTERPRISES OF NAPLES LLC

FILED May 01, 2008 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
oarrent i interpar i tace of basi	11000.	i illioipai i lace di Da.	JIII ~ JJ.

5251 GOLDEN GATE PKWY 851 HOMESTEAD RD N

#F LEHIGH ACRES, FL 33936 US

NAPLES, FL 34116 US

Current Mailing Address: New Mailing Address:

5251 GOLDEN GATE PKWY P.O. BOX 9105

#F NAPLES, FL 34101 US NAPLES, FL 34101 US

FEI Number: 16-1618832 FEI Number Applied For () FEI Number Not Applicable ()

per Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MARIA, PATE

14566 INDIGO LAKES CIR

NAPLES, FL 34119 US

LUSCETTA, PLUNKETT

1901 40TH TERR SW

NAPLES, FL 34116 US

NAPLES, FL 34116 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: LUSCETTA PLIUNKETT 05/01/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 TAYLOR, HUBERT E
 Name:

 Address:
 3054 52ND STREET SW
 Address:

 City-St-Zip:
 NAPLES, FL 34116
 City-St-Zip:

Title: MGR () Delete Title: MGRM (X) Change () Addition

Name: DIANE, RENE Name: LUSCETTA, PLUNKETT J
Address: 1217 HOMESTEAD RD N Address: P.O.BOX 9105

Address: 1217 HOMESTEAD RD N Address: P.O.BOX 9105
City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: NAPLES, FL 34101

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 LUSCETTA, PLUNKETT J
 Name:

 Address:
 1217 HOMESTEAD RD N
 Address:

 City-St-Zip:
 LEHIGH ACRES, FL 33936
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LUSCETTA PLUNKETT MGRM 05/01/2008