

**2010 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Oct 08, 2010  
Secretary of State**

DOCUMENT# L02000034328

**Entity Name:** TOPS'L CLUB OF NW FLORIDA, LLC

**Current Principal Place of Business:**

546 MARY ESTHER CUT-OFF NW, SUITE 3  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

546 MARY ESTHER CUT-OFF NW, SUITE 3  
FORT WALTON BEACH, FL 32548

**New Mailing Address:**

22 SYLVAN WAY  
PARSIPPANY, NJ 07054

FEI Number: 65-1176005

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: CONFORTI, THOMAS G  
Address: 22 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: MGR  
Name: HOLMES, STEPHEN P  
Address: 22 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

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: THOMAS GEORGE CONFORTI

MGR

10/08/2010

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