


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 08, 2007 8:00 am
Secretary of State

04-11-2007 90162 021 ****55.00

DOCUMENT # L02000034974	
1. Entity Name TAMIAAMI SQUARE OF NAPLES, LLC	

Principal Place of Business 2375 TAMIAAMI TRAIL NORTH STE. 208C NAPLES, FL 34103	Mailing Address 2375 TAMIAAMI TRAIL NORTH STE. 208C C/O CRIFASI ENTERPRISES, INC. NAPLES, FL 34103
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30007225



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01152007 Chg-LLC CR2E083 (12/06)

4. FEI Number 51-0444865	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent CRIFASI ENTERPRISES, INC. 2375 TAMIAAMI TRAIL NORTH STE. 208C NAPLES, FL 34103	
7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 _____ (NOTE: Registered Agent signature required when remaining) DATE _____

Filing Fee is \$50.00 Due by May 1, 2007	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CRIFASI ENTERPRISES, INC. 2375 TAMIAAMI TRIAL NORTH, SUITE 208C NAPLES, FL 34103 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 506, Florida Statutes.

SIGNATURE: _____	Date: 6/23/07
SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	



ATTACHMENT
36007225
Division of Corporations

2007 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the
annual report form.

This information cannot be changed on the report.	
Document Number	L02000034974
Business Entity Name	TAMIAMI SQUARE OF NAPLES, LLC
Original File Date	12/27/2002

FEI Number 51-0444865

Principal Address 2375 TAMIAMI TRAIL NORTH STE. 208C
NAPLES, FL 34103

Mailing Address 2375 TAMIAMI TRAIL NORTH STE. 208C
C/O CRIFASI ENTERPRISES, INC.
NAPLES, FL 34103

Registered Agent CRIFASI ENTERPRISES, INC.
2375 TAMIAMI TRAIL NORTH STE. 208C
NAPLES, FL 34103 US

Managing Member/Manager Name And Address

MGR
CRIFASI ENTERPRISES, INC.
2375 TAMIAMI TRIAL NORTH, SUITE 208C
NAPLES, FL 34103

If all of the above
information is correct
and you do not wish
to make any changes,
please select:

No Changes

If you need to make
changes to the above
information, please
select:

Make Changes

ATTACHMENT

30007225

Sunbiz Home Page

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