

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90020 030 ***138.75

DOCUMENT # L03000007711

1. Entity Name
KDJ NAPLES, L.L.C.



Principal Place of Business
6201 CORTEZ RD. W.
BRADENTON, FL 34210

Mailing Address
6201 CORTEZ RD. W.
BRADENTON, FL 34210

60036795



03122008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
14-1874675

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

NORTON, SAM D
1819 MAIN STREET, SUITE 610
SARASOTA, FL 34236

**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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
ODEN, KEVIN
1510 CROOKER ST.
SARASOTA, FL 34231
62 TIDY ISLAND BLVD
BRADENTON, FL 34210

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
ODEN, JAN
62 TIDY ISLAND BLVD
BRADENTON, FL 34210

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
HARDY, DANIEL
8307 MARINA DR
HOLMES BEACH, FL 34217

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

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

Date

Daytime Phone #

4/4/08 941-712-2233