

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90032 027 ****55.00

DOCUMENT # L03000014723

1. Entity Name
STETSON PROPERTIES, LLC



Principal Place of Business
**8540 MALLARDS WAY
NAPLES, FL 34114**

Mailing Address
**3200 TAMiami TRAIL NORTH
SUITE 200
NAPLES, FL 34109 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01102006 Chg-LLC CR2E083 (11/05)

4. FEI Number
55-0828590

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LADEMAN, CARRIE E
3200 TAMiami TRAIL NORTH, STE. 200
NAPLES, FL 34103**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
STETSON, WILLIS J JR.
23 SLEEPY HOLLOW DR.
NEWTOWN SQUARE, PA 19073** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ 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 608, Florida Statutes.

SIGNATURE:

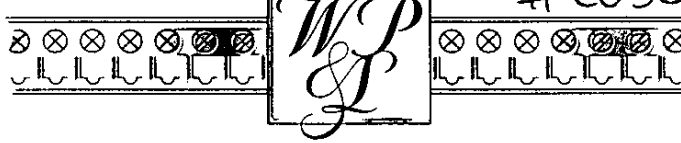
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

ATTACHMENT

20029274
L03000014723



WOODWARD, PIRES & LOMBARDO, P.A.
Attorneys - At - Law

April 7, 2006

CRAIG R. WOODWARD ●
MARK J. WOODWARD
ANTHONY P. PIRES, JR. ■
J. CHRISTOPHER LOMBARDO
STEVEN V. BLOUNT
CARRIE E. LADEMAN

Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

Re: Stetson Properties, LLC.

CARLO F. ZAMPOGNA
JENNIFER L. SZYMANSKI

To Whom It May Concern:

Enclosed for filing please find the original 2006 Annual Report for the above referenced limited liability company and a check in the amount of \$55.00 for the filing fee and Certificate of Status.

Please feel free to contact me if you have any questions or need anything further.

Very truly yours,

Nicole Turley
Assistant to Carrie E. Lademan, Esq.

\nmt
Enclosures

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