

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015711

Entity Name: SHAMROCK OF NAPLES, LLC

FILED
Apr 10, 2008
Secretary of State

Current Principal Place of Business:

160 NINTH STREET SOUTH
NAPLES, FL 34102

New Principal Place of Business:

871 CASSENA RD
NAPLES, FL 34108

Current Mailing Address:

160 NINTH STREET SOUTH
NAPLES, FL 34102

New Mailing Address:

871 CASSENA RD.
NAPLES, FL 34108

FEI Number: 34-1986364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAVIELLO, MICHAEL A JR.
1025 FIFTH AVENUE NORTH
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

KELLY, HELEN J
871 CASSENA RD
NAPLES, FL 34108 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: HELEN J.KELLY

04/10/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KELLY, THOMAS F SR.
Address: 160 NINTH STREET SOUTH
City-St-Zip: NAPLES, FL 34102

Title: MGRM () Delete
Name: KELLY, HELEN
Address: 160 NINTH STREET SOUTH
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KELLY, THOMAS F SR.
Address: 871 CASSENA RD.
City-St-Zip: NAPLES, FL 34108

Title: MGRM (X) Change () Addition
Name: KELLY, HELEN
Address: 871 CASSENA RD.
City-St-Zip: NAPLES, FL 34108

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: HELEN J. KELLY

MGRM

04/10/2008

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