

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024175

Entity Name: 4109, LLC

FILED  
Feb 16, 2005  
Secretary of State

**Current Principal Place of Business:**

400 5TH AVENUE SOUTH, SUITE 205  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

400 5TH AVENUE SOUTH, SUITE 205  
NAPLES, FL 34102

**New Mailing Address:**

FEI Number: 56-2433766

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SOLIS, ANDREW I ESQ.  
1100 5TH AVENUE SOUTH, SUITE 301  
NAPLES, FL 34102 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: CLINTON, JD  
Address: 400 5TH AVE SOUTH SUITE 205  
City-St-Zip: NAPLES, FL 34102

Title: MGR ( ) Delete  
Name: ARMANDO, PARRA JR.  
Address: 400 5TH AVE SOUTH SUITE 205  
City-St-Zip: NAPLES, FL 34102

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: J.D. CLINTON

MGRM

02/16/2005

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