## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000048372

Entity Name: SALVATORI & WOOD, P.L.

FILED Jan 10, 2006 Secretary of State

**Current Principal Place of Business:** 

4001 TAMIAMI TRAIL NORTH, STE 330

4001 TAMIAMI TRAIL NORTH

**New Principal Place of Business:** 

SUITE 330

NAPLES, FL 34103

**Current Mailing Address:** 

**New Mailing Address:** 

4001 TAMIAMI TRAIL NORTH, STE 330 NAPLES, FL 34103

4001 TAMIAMI TRAIL NORTH SUITE 330

NAPLES, FL 34103

FEI Number: 20-0437853

NAPLES, FL 34103

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WOOD, C. LANE

NAPLES, FL 34103

WOOD, C. LANE

4001 TÁMIAMI TRAIL NORTH, STE 330

4001 TÁMIAMI TRAIL NORTH

SUITE 330

NAPLES, FL 34103 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: C. LANE WOOD

01/10/2006

Electronic Signature of Registered Agent

FEI Number Applied For ( )

Date

MANAGING MEMBERS/MANAGERS:

MGRM () Delete SALVATORI, LEO J ESQ Name:

Address: 4001 TAMIAMI TRAIL NORTH, STE 330

City-St-Zip: NAPLES, FL 34103

Title: MGRM ( ) Delete Name: WOOD, C. LANE ESQ

SIGNATURE: C. LANE WOOD

Address: 4001 TAMIAMI TRAIL NORTH, STE 330

City-St-Zip: NAPLES, FL 34103 ADDITIONS/CHANGES:

Title: (X) Change ( ) Addition

SALVATORI, LEO J Name:

Address: 4001 TAMIAMI TRAIL NORTH, STE 330

City-St-Zip: NAPLES, FL 34103

(X) Change ( ) Addition Title: MGRM

Name: WOOD, C. LANE

Address: 4001 TAMIAMI TRAIL NORTH, STE 330

City-St-Zip: NAPLES, FL 34103

**MGRM** 

01/10/2006

I hereby certify that the information supplied with this filing does not qualify for the 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.

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