

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051428

FILED
Feb 06, 2004
Secretary of State

Entity Name: DUGAN-NAPLES LLC

Current Principal Place of Business:

8640 CEDAR HAMMOCK CIR, UNIT 513
NAPLES, FL

New Principal Place of Business:

8640 CEDAR HAMMOCK CIR,
UNIT 513
NAPLES, FL 34112

Current Mailing Address:

8640 CEDAR HAMMOCK CIR, UNIT 513
NAPLES, FL

New Mailing Address:

8640 CEDAR HAMMOCK CIR,
UNIT 513
NAPLES, FL 34112

FEI Number: 56-2422895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DUGAN, KAREN A
Address: 10 ANNE TERESA WAY
City-St-Zip: WESTFORD, MA 01886

Title: MGRM () Delete
Name: DUGAN, JOHN D
Address: 10 ANNE TERESA WAY
City-St-Zip: WESTFORD, MA 01886

Title: MGRM () Delete
Name: DUGAN, BRENDA M
Address: 97 ESKER RD
City-St-Zip: HAMPTON, NH 03842

Title: MGRM () Delete
Name: DUGAN, DENIS K
Address: 97 ESKER RD
City-St-Zip: HAMPTON, NH 03842

ADDITIONS/CHANGES:

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

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

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: DENIS K DUGAN

MGRM

02/06/2004

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