

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000019931

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: NAPOLEON FINANCIAL GROUP, LLC

## Current Principal Place of Business:

24850 OLDE 41 RD SUITE 23  
BONITA SPRINGS, FL 34135

## New Principal Place of Business:

9510 CORKSCREW PALMS CIRCLE  
SUITE 4  
ESTERO, FL 33928

## Current Mailing Address:

24850 OLDE 41 RD SUITE 23  
BONITA SPRINGS, FL 34135

## New Mailing Address:

9510 CORKSCREW PALMS CIRCLE  
SUITE 4  
ESTERO, FL 33928

FEI Number: 72-1580510

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NAPOLEON, VINCENT  
160 CARICA ROAD  
NAPLES, FL 34108 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/MANAGERS:

Title: MGRM ( ) Delete  
Name: NAPOLEON, VINCENT  
Address: 160 CARICA ROAD  
City-St-Zip: NAPLES, FL 34108 US

Title: MGR ( ) Delete  
Name: SCHIERING, JASON  
Address: 21817 RAINBOW LAKE COURT  
City-St-Zip: ESTERO, FL 33928 US

Title: MGR ( ) Delete  
Name: ATCHISON, COLLIN  
Address: 5326 10TH AVENUE SW  
City-St-Zip: NAPLES, FL 34115 US

Title: MGR ( ) Delete  
Name: SCHIERING, JAMES  
Address: 292 LAMBTON LANE  
City-St-Zip: NAPLES, FL 34104 US

## ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change ( ) Addition  
Name: ATCHISON, COLLIN  
Address: 21501 BACCRAT LANE # 210  
City-St-Zip: ESTERO, FL 33928 US

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

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: JASON L SCHIERING

MGR

04/28/2008

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