

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 04, 2005 8:00 am
Secretary of State

07-11-2005 90042 030 ****50.00

DOCUMENT # L04000034169					
1. Entity Name A-1 PATIOS, L.L.C.					
Principal Place of Business 1754 BEVERLY DR NAPLES, FL 34114			Mailing Address 1754 BEVERLY DR NAPLES, FL 34114		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	07072005 Chg-LLC CR2E083 (10/03)	
4. FEI Number 816-1105988				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent SPARKMAN, RICHARD D ESQ 307 AIRPORT PULLING ROAD NORTH NAPLES, FL 34104			7. Name and Address of New Registered Agent Name Sharon Hendricks Street Address (P.O. Box Number is Not Acceptable) 29041 Westbrook DR City Bonita Springs FL Zip Code 34355		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Sharon B. Hendricks</u> DATE <u>7/7/05</u> Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$50.00 Due by September 7, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ELLIS, HOWARD 1754 BEVERLY DR NAPLES, FL 34114	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Hatcher Michael 2532 ANDREW DR Naples, FL 34112	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BATCHER, ZACHARY 1290 HIGHLAND DR, APT 1-A NAPLES, FL 34103	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ZENZ, Andrew 2532 ANDREW DR Naples, FL 34112	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GAINES, CHARLES 4255 JEFFERSON LANE, APT 7202 NAPLES, FL 34116	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOULD, JEREMY 4255 JEFFERSON LANE, APT 7202 NAPLES, FL 34116	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>Howard Ellis - Howard Ellis</u> DATE <u>7-7-05</u> <u>239</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Daytime Phone # <u>417 4224</u>					