

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90066 049 ****50.00

DOCUMENT # L04000038080

1. Entity Name
FHI NAPLES MANAGEMENT, LLC



Principal Place of Business 320 BALMORAL COURT DAVENPORT, FL 33896 US	Mailing Address 717 EAST OAK STREET KISSIMMEE, FL 34744 US
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DO NOT WRITE IN THIS SPACE



04042006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1157167	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**HENRY, EDDIE
 320 BALMORAL COURT
 DAVENPORT, FL 33896**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HENRY, EDDIE 320 BALMORAL COURT DAVENPORT, FL 33896
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HENRY, ADRIENNE 320 BALMORAL COURT DAVENPORT, FL 33896
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MIDWINTER, GRAHAM 320 BALMORAL COURT DAVENPORT, FL 33896
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MIDWINTER, LINDA 320 BALMORAL COURT DAVENPORT, FL 33896
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Adrienne Henry **ADRIENNE HENRY** 28 Apr 2006 863-206-7741

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #