2006 LIMITED LIABILITY COMPANY "ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # L04000047970

1. Entity Name NEAPOLITAN HOLDING COMPANY, LLC

FILED Mar 20, 2006 08:00 AM Secretary of State

Principal Place of Business 715 TENTH STREET SOUTH

NAPLES, FL 34102

Mailing Address

715 TENTH STREET SOUTH NAPLES, FL 34102



03032006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 43-2055244 Applied For Not Applicable

5. Certificate of Status Desired

3-13-2006

(239) 263-8333

Daytima Phone ∉

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SUTTON, KERMIT S 715 TENTH STREET SOUTH NAPLES, FL 34102

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of chan ions of registered agent.	ging its registered affice or registered agent, or both, in the S	itate of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered apert and title if applicable.	(NOTE Registered Agent signature required when reinstaking)	DATE
Filing Fee is \$50.00 Due by May 1, 2006		Umadan475177 04/05/06-80005-007 50.00	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR SUTTON, KERMIT S 715 TENTH STREET SOUTH NAPLES, FL 34102		
THILE NAME STREET ADORESS CITY-ST-ZIP			
TITLE NAME STREET AUDRESS CITY-ST-ZIP		DO NO	T WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP		IN THIS	SSPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			•
11. I hereby indicated limited lie	ortily that the information supplied with this filling does not on this report is true and accurate and that my signature si ability company or the receiver or trustee empowered to exe	qualify for the exemptions contained in Chapter 119, Florida hall have the same legal effect as if made under oath; that I cute this report as required by Chapter 608, Florida Statutes	Statutes. I further certify that the information am a managing member or manager of the state of