2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# L04000065998

Entity Name: GERMAIN PROPERTIES OF NAPLES, LLC

Current Principal Place of Business:

500 5TH AVENUE SOUTH, SUITE 506
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

500 5TH AVENUE SOUTH, SUITE 506
NAPLES, FL 34102

New Mailing Address:

FEI Number: 26-0094727 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROGERS, WILLIAM L
10661 AIRPORT-PULLING ROAD
16
NAPLES, FL 34109 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:	GERMAIN, ROBERT L JR	
Address:	13315 NORTH TAMIAMI TRL	
City-St-Zip:	NAPLES, FL 33963	
Title:	MGR	( ) Delete
Name:	CZYSEN-STOREY, KATHY	
Address:	500 5TH AVE SOUTH STE 506	
City-St-Zip:	NAPLES, FL 34102	
Title:	AS	( ) Delete
Name:	MCCARTHY, SEAN H	
Address:	4250 MORSE CROSSING	
City-St-Zip:	COLUMBUS, OH 43219	
Title:	MGR	( ) Delete
Name:	GARBO, JOHN D	
Address:	500 FIFTH AVENUE SOUTH, SUITE 506	
City-St-Zip:	NAPLES, FL 34102	

ADDITIONS/CHANGES:

Title:	MGRM	(X) Change ( ) Addition
Name:	GERMAIN, ROBERT L JR	
Address:	13315 NORTH TAMIAMI TRL	
City-St-Zip:	NAPLES, FL 34110	
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 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: MATTHEW M. MCKINNON CPA 04/29/2008

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