

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081275

FILED
Mar 02, 2009
Secretary of State

Entity Name: 2628 PONCE DE LEON DRIVE, LLC

Current Principal Place of Business:

1037 FIFTH AVENUE NORTH
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

1037 FIFTH AVENUE NORTH
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 20-1871892

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRABINSKI, MATTHEW L
4001 TAMIAMI TRAIL N.
#300
NAPLES, FL 34103 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: MGR () Delete
Name: THORNHILL, GLENN OSWALD
Address: 1037 5TH AVE N
City-St-Zip: NAPLES, FL 34102 US

Title: MGRT () Delete
Name: GULLIFORD, JOHN T
Address: 1037 5TH AVE, N
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: THORNHILL, GLENN O
Address: 1037 5TH AVE N
City-St-Zip: NAPLES, FL 34102 US

Title: MGR (X) Change () Addition
Name: GULLIFORD, JOHN T
Address: 1037 5TH AVE, N
City-St-Zip: NAPLES, FL 34102

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: JOHN T GULLIFORD

MR

03/02/2009

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