

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000085615

Entity Name: NAPLES G2M2, LLC

FILED  
Feb 04, 2007  
Secretary of State

**Current Principal Place of Business:**

182 BURNET CRESCENT  
ROBBINSVILLE, NJ 08691

**New Principal Place of Business:**

**Current Mailing Address:**

182 BURNET CRESCENT  
ROBBINSVILLE, NJ 08691

**New Mailing Address:**

FEI Number: 87-0736056

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MUNROE, W. BRADLEY ESQUIRE  
239 E. VIRGINIA STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

SULLIVAN, LAURIE  
3774 WHIDBEY WAY  
NAPLES, FL 34119 US

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: LAURIE SULLIVAN

02/04/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MOSKOWITZ, MICHAEL PE  
Address: 182 BURNET CRESCENT  
City-St-Zip: ROBBINSVILLE, NJ 08691

Title: MGRM ( ) Delete  
Name: GUARINI, VINCENT E M.D.  
Address: 136 BURNET CRESCENT  
City-St-Zip: ROBBINSVILLE, NJ 08691

Title: MGRM ( ) Delete  
Name: GUARINI, LISA A RN  
Address: 136 BURNET CRESCENT  
City-St-Zip: ROBBINSVILLE, NJ 08691

Title: MGRM ( ) Delete  
Name: MEISBERGER, KAREN D CRNA  
Address: 182 BURNET CRESCENT  
City-St-Zip: ROBBINSVILLE, NJ 08691

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: MICHAEL MOSKOWITZ

MGRM

02/04/2007

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