

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008628

FILED
Apr 30, 2009
Secretary of State

Entity Name: FOLEY ASSOCIATES OF SOUTHWEST FLORIDA, LLC

Current Principal Place of Business:

575 KETCH DRIVE
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

575 KETCH DRIVE
NAPLES, FL 34103

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOREY, JAMES F ESQ
2375 TAMIAMI TRAIL N
SUITE 210
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

MOREY, JAMES F ESQ
4001 TAMIAMI TRAIL N
SUITE 250
NAPLES, FL 34103 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: JAMES F MOREY

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FOLEY, LOUIS FRANK
Address: 575 KETCH DRIVE
City-St-Zip: NAPLES, FL 34103

Title: MGRM () Delete
Name: FOLEY, JENNIFER MCLEA
Address: 575 KETCH DRIVE
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES:

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: LOUIS F FOLEY

MGRM

04/30/2009

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