

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000076051

FILED
Apr 27, 2009
Secretary of State

Entity Name: TOUCH OF NAPOLI, LLC

Current Principal Place of Business:

14277 POWELL RD
SPRING HILL, FL 34609 US

New Principal Place of Business:

Current Mailing Address:

4060 BRECKLAND COURT
SPRING HILL, FL 34609 US

New Mailing Address:

FEI Number: 20-3218462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTALBANO, MARYANN J
4060 BRECKLAND CT
SPRING HILL, FL 34609 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: MONTALBANO, MARYANN J
Address: 4060 BRECKLAND COURT
City-St-Zip: SPRING HILL, FL 34609 US

Title: M () Delete
Name: BARILE, LUIGI
Address: 2425 HAWTHORNE ROAD
City-St-Zip: SPRING HILL, FL 34609

Title: MGR () Delete
Name: CACACE, ANTONIO
Address: 3332 HARROW RD.
City-St-Zip: SPRING HILL, FL 34608

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: BARILE, LUIGI
Address: 2425 HAWTHORNE ROAD
City-St-Zip: SPRING HILL, FL 34609

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: MARYANN J. MONTALBANO

MGRM

04/27/2009

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