2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000080093

1. Entity Name
MAPLE PROPERTIES LLC



Principal Place of Business Mailing Addre

700 ELEVENTH STREET SOUTH, PH-2 NAPLES, FL 34102-6777

Mailing Address 4710 15TH AVE. S.W. NAPLES, FL 34116

FILED Jul 16, 2008 08:00 AM Secretary of State



03102008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	 Applied For
20-3348221	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MORRISON, CANDACE B 4710 15TH AVE. S.W. NAPLES, FL 34116

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the obligations of registered agent.					
SIGNATURE.		•			
	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when rea	istating) DATE		
FILI After May	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR FICUS GROUP LLC 700 ELEVENTH STREET SOUTH,PH 2 NAPLES, FL 34102				
TITLE NAME STREET ADDRESS CITY-S1-ZIP			3.75		
TITLE NAME STREET ADORESS CITY-ST-ZIP		:	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-2IP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
11. hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Flunda Statutes. I further certify that the information					

In thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. Hurther certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that it im 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: Comerus

7.6:08 239.430.4306

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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