

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092516

Entity Name: CIC LLC

FILED  
Apr 30, 2007  
Secretary of State

**Current Principal Place of Business:**

1660 MEDICAL BLVD., SUITE 100  
NAPLES, FL 34110

**New Principal Place of Business:**

1237 POCANTICO LANE  
NAPLES, FL 34110

**Current Mailing Address:**

1660 MEDICAL BLVD., SUITE 100  
NAPLES, FL 34110

**New Mailing Address:**

P. O. BOX 112110  
NAPLES, FL 34108

FEI Number: 20-3528230

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NAPLES-LAWDOCK, INC.  
1395 PANTHER LANE  
NAPLES, FL 34109 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: KENT, CHARLOTTE A  
Address: 1660 MEDICAL BLVD STE 100  
City-St-Zip: NAPLES, FL 34110

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: KENT, CHARLOTTE A  
Address: 1237 POCANTICO LANE  
City-St-Zip: NAPLES, FL 34110

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: CHARLOTTE A. KENT

MGMR

04/30/2007

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