

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000114842

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** NAPLES OCEAN DREAM, LLC

**Current Principal Place of Business:**

PMB #40 8595 COLLIER BLVD.  
SUITE 107  
NAPLES, FL 34114

**New Principal Place of Business:**

**Current Mailing Address:**

PMB #40 8595 COLLIER BLVD.  
SUITE 107  
NAPLES, FL 34114

**New Mailing Address:**

**FEI Number:** 76-0808708

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YEAGER CHEFFY, JANES  
2375 TAMiami TRAIL NORTH SUITE #310  
NAPLES, FL 34103 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  
**Name:** FOX, KEN  
**Address:** 3893 MANNIX DRIVE UNIT 522  
**City-St-Zip:** NAPLES, FL 34114

**Title:** MGRM  
**Name:** SPEZIO, JOSEPH  
**Address:** 3893 MANNIX DR UNIT 218  
**City-St-Zip:** NAPLES, FL 34114

**Title:** MGRM  
**Name:** ANDREA, THOMAS  
**Address:** 3893 MANNIX DR UNIT 218  
**City-St-Zip:** NAPLES, FL 34114

**Title:** MGRM  
**Name:** PETERS, DONALD  
**Address:** 3893 MANNIX DR UNIT 218  
**City-St-Zip:** NAPLES, FL 34114

I hereby 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:** KENNETH FOX

MGRM

04/22/2010

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