

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 12, 2006 8:00 am
Secretary of State

04-20-2006 90033 009 *****55.00

DOCUMENT # L05000120213					
1. Entity Name METRO-DANIELS(NORTH PARCEL)INVESTORS, LLC					
Principal Place of Business 2606 SOUTH HORSESHOE DRIVE NAPLES, FL 34104			Mailing Address 2606 SOUTH HORSESHOE DRIVE NAPLES, FL 34104		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-1146850	
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent GRANT, RICHARD C ESQ 5551 RIDGEWOOD DRIVE STE 501 NAPLES, FL 34108			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition		
		ADD-ADD MANAGING MEMBER			
		JACK AMERLANDO			
		365 5TH AVE. S., STE 201			
		NAPLES, FL 34102			
		ADD MANAGING MEMBER			
		FRED PERESHKIN			
		2606 HORSESHOE DR. S.			
		NAPLES, FL 34104			
		VICE PRESIDENT			
		THOMAS A. MACIVOR			
		365 5TH AVE. S., STE 201			
		NAPLES, FL 34102			
			☐ Change ☐ Addition		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further 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 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: <u>Thomas A. MacIvor</u> Thomas A. MacIvor V.P. 4/10/06 (235) 434-0600					

RECEIVED

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