

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000003261

FILED  
Jul 05, 2007  
Secretary of State

Entity Name: CASHIERS, LLC

## Current Principal Place of Business:

5150 TAMIAMI TRAIL NORTH  
SUITE 501  
NAPLES, FL 34103

## New Principal Place of Business:

## Current Mailing Address:

5150 TAMIAMI TRAIL NORTH  
SUITE 501  
NAPLES, FL 34103

## New Mailing Address:

FEI Number: 20-4074781      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

LEIGH, DAVID E  
5150 TAMIAMI TRAIL, NORTH  
SUITE 501  
NAPLES, FL 34103 US

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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition  
Name: LEIGH, DAVID E  
Address: 5150 TAMIAMI TRAIL NORTH, SUITE 501  
City-St-Zip: NAPLES, FL 34103

Title: MGRM ( ) Change (X) Addition  
Name: GARADELLA, FRAZIER R  
Address: 2777 66TH STREET SW  
City-St-Zip: NAPLES, FL 34105

Title: MGRM ( ) Change (X) Addition  
Name: KENZIE, DAVID  
Address: 109 EUGENIA DRIVE  
City-St-Zip: NAPLES, FL 34108

Title: M ( ) Change (X) Addition  
Name: BOLLINGER, PAUL  
Address: 330 CRESCENT TRAIL  
City-St-Zip: HIGHLANDS, NC 28741

Title: M ( ) Change (X) Addition  
Name: BULTNICK, STEFFAN E  
Address: 958 SPYGLASS LANE  
City-St-Zip: NAPLES, FL 34102

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: DAVID E LEIGH

MGRM

07/05/2007

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