

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053682

FILED
Apr 23, 2009
Secretary of State

Entity Name: FIVE COUPLES ST PETE'S # 105, LLC

Current Principal Place of Business:

11550 ROYAL TEE CIRCLE
CAPE CORAL, FL 33991 US

New Principal Place of Business:

Current Mailing Address:

11550 ROYAL TEE CIRCLE
CAPE CORAL, FL 33991 US

New Mailing Address:

11550 ROYAL TEE CIRCLE
CAPE CORAL, FL 33991 US

FEI Number: 20-4932148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIOLA, LOUIS A
11550 ROYAL TEE CIRCLE
CAPE CORAL, FL 33991 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: FIOLA, LOUIS A
Address: 11550 ROYAL TEE CIRCLE
City-St-Zip: CAPE CORAL, FL 33991 US

Title: MGRM () Delete
Name: TAYLOR, CLIFFORD
Address: 414 SE 21ST STREET
City-St-Zip: CAPE CORAL, FL 33990 US

Title: MGRM () Delete
Name: VACCA, MICHAEL
Address: 26 W NORTON DRIVE
City-St-Zip: SOUTHAMPTON, PA 18966 US

Title: MGRM () Delete
Name: COCCIA, VINCENT
Address: 13042 RICHWOOD ROAD
City-St-Zip: PHILADELPHIA, PA 19116 US

Title: MGRM () Delete
Name: FIOLA, ANTHONY J
Address: 750 CARPENTER STREET
City-St-Zip: GLASSBORO, NJ 08028 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LOUIS A FIOLA

MGRM

04/23/2009

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