

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 04, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000063945

1. Entity Name

J & E PROPERTIES OF NAPLES, LLC



Principal Place of Business

700 11TH STREET SOUTH
SUITE PH3
NAPLES, FL 34102 US

Mailing Address

700 11TH STREET SOUTH
SUITE PH3
NAPLES, FL 34102 US



01242008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-5102641

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CLARK, STEVEN E
700 11TH STREET SOUTH
SUITE PH3
NAPLES, FL 34102

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000847252
03/19/08-80012-023 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ABBOTT, JEFF 8165 MOYER LANE BOKEELIA, FL 33922
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SEIB, EVE 1470 VALLEY GLEN WAY ATLANTA, GA 30338
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2.28.08 *239 283 4117*

Date

Daytime Phone #