

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089295

Entity Name: 15 NAPLES, LLC

FILED
May 19, 2009
Secretary of State

Current Principal Place of Business:

11400 NAUTICA COURT
WELLINGTON, FL 33467

New Principal Place of Business:

11400 NAUTICA COURT
WELLINGTON, FL 33449

Current Mailing Address:

11400 NAUTICA COURT
WELLINGTON, FL 33467

New Mailing Address:

11400 NAUTICA COURT
WELLINGTON, FL 33449

FEI Number: 20-8162489 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:

SETH E. ELLIS, P.A.
2385 EXECUTIVE CENTER DRIVE, SUITE 190
BOCA RATON, FL 33431 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: BERMAN, BRIAN
Address: 11400 NAUTICA CT
City-St-Zip: WELLINGTON, FL 33467

Title: MGRM (X) Delete
Name: BERMAN, RANDY
Address: 11400 NAUTICA CT
City-St-Zip: WELLINGTON, FL 33467

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BERMAN, RANDY
Address: 11400 NAUTICA CT
City-St-Zip: WELLINGTON, FL 33449

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: RANDY BERMAN

MGRM

05/19/2009

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