

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000110159

**FILED**  
**Apr 12, 2009**  
**Secretary of State**

**Entity Name:** FRENCH QUARTER COLLIER, LLC

**Current Principal Place of Business:**

600 FIFTH AVENUE SOUTH, SUITE 207  
NAPLES, FL 34102

**New Principal Place of Business:**

501 GOODLETTE RD. N.  
D-100  
NAPLES, FL 34102

**Current Mailing Address:**

600 FIFTH AVENUE SOUTH, SUITE 207  
NAPLES, FL 34102

**New Mailing Address:**

501 GOODLETTE RD. N.  
D-100  
NAPLES, FL 34102

**FEI Number:** 20-8924879

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRUGGER, JOHN N  
600 FIFTH AVENUE SOUTH  
SUITE 207  
NAPLES, FL 34102 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: MGR ( ) Delete  
Name: CALLIS, JOHN  
Address: 600 FIFTH AVENUE SOUTH, SUITE 207  
City-St-Zip: NAPLES, FL 34102

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CALLIS, JOHN  
Address: 501 GOODLETTE RD. N., D-100  
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: JOHN CALLIS

MGR

04/12/2009

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