

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000013498

Entity Name: NAPLESCENTRIC L.L.C.

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

6035 TROPHY DRIVE, APT. 101
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

6035 TROPHY DRIVE, APT. 101
NAPLES, FL 34110

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLANO, PETER
582 WEDGEWOOD WAY
NAPLES, FL 34119 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: MAYUM, ROBERT
Address: 6035 TROPHY DRIVE, APT. 101
City-St-Zip: NAPLES, FL 34110

Title: MGRM () Delete
Name: SOLANO, PETER
Address: 582 WEDGEWOOD WAY
City-St-Zip: NAPLES, FL 34119

Title: MGRM () Delete
Name: SERFASS, JACK
Address: 586 WEDGEWOOD WAY
City-St-Zip: NAPLES, FL 34119

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:

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: PETER SOLANO

MGRM

01/07/2008

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