

Received:
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May

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Jul 15, 2008 8:00 am
Secretary of State

05-05-2008 90037 009 ***138.75

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L07000042874			
1. Entity Name DESIMONE, L.L.C.			
Principal Place of Business 2978 DR. MARTIN LUTHER KING, JR. BLVD. FT. MYERS, FL 33902		Mailing Address 14 WALNUT STREET DANBURY, CT 06811	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. EEI Number 26-2337733		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent WRIGHT, CHRISTINE F ESQ. 2735 SANTA BARBARA BLVD., SUITE 201 CAPE CORAL, FL 33914		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 is acceptable. (NOTE: Registered Agent signature required unless registered agent is a corporation.)			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DESIMONE, JOSEPH 14 WALNUT STREET DANBURY, CT 06811 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DESIMONE, ANGELO 14 WALNUT STREET DANBURY, CT 06811 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DESIMONE, VICTOR 14 WALNUT STREET DANBURY, CT 06811 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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 sign this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: <u>Angelo Desimone</u>		Date: <u>5-1-08</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date	

ATTACHMENT
30010382

July 7, 2008

Division of Corporations
P.O. Box 6478
Tallahassee, Florida 32314

Reference Number: L07000042874

Dear Gentlemen,

This letter is in response to the Florida Department of State request for additional information regarding the annual report for Desimone, LLC. Enclosed please find the corrected annual report updated to include the Federal Employer Identification (FEI).

We respectfully request that any late filing fees be abated, based on our original timely filing.

Should you have any questions or require any additional information please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Angelo Desimone". The signature is fluid and cursive, with the first name "Angelo" written in a larger, more prominent script than the last name "Desimone".

Angelo Desimone, Member