2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000025208

LICAVOLI, SAMUEL

10232 ORCHID RIDGE LANE

BONITA SPRINGS, FL 34135

Name:

Address:

City-St-Zip:

Entity Name: LICAVOLI, LLC

FILED Jan 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10232 ORCHID RIDGE LANE BONITA SPRINGS, FL 34135 **Current Mailing Address: New Mailing Address:** 10232 ORCHID RIDGE LANE BONITA SPRINGS, FL 34135 FEI Number: 26-2598149 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOLANOS TRUXTON, P.A. 12800 UNIVERSITY DRIVE, SUITE 350 FORT MYERS, FL 33907 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: ADDITIONS/CHANGES: () Delete 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: PAT J PAIGE CPA 01/09/2009