

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000028318

**FILED**  
**Feb 02, 2011**  
**Secretary of State**

**Entity Name:** NAPLES 9, LLC

**Current Principal Place of Business:**

12763 STARK ROAD, SUITE 101  
LIVONIA, MI 48150

**New Principal Place of Business:**

**Current Mailing Address:**

12763 STARK ROAD, SUITE 101  
LIVONIA, MI 48150

**New Mailing Address:**

**FEI Number:** 26-2240105

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOLANOS TRUXTON, P.A.  
12800 UNIVERSITY DRIVE, SUITE 350  
FT. MYERS, FL 33907 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  
**Name:** PRICE, GARY M  
**Address:** 9722 COMMERCE CENTER COURT  
**City-St-Zip:** FT. MYERS, FL 33908

**Title:** MGR  
**Name:** BOYLE, JOSEPH M  
**Address:** 12763 STARK ROAD, SUITE 101  
**City-St-Zip:** LIVONIA, MI 48150

I hereby 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:** JOSEPH M. BOYLE

MGR

02/02/2011

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