

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000029303

FILED
Mar 07, 2009
Secretary of State

Entity Name: TOPHET-BLYTH LLC

Current Principal Place of Business:

1415 PANTHER LANE, SUITE 402
NAPLES, FL 34109

New Principal Place of Business:

1415 PANTHER LANE
SUITE 402
NAPLES, FL 34109

Current Mailing Address:

1415 PANTHER LANE, SUITE 402
NAPLES, FL 34109

New Mailing Address:

1415 PANTHER LANE
SUITE 402
NAPLES, FL 34109

FEI Number: 26-2270868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPLES-LAWDOCK, INC.
1395 PANTHER LANE, SUITE 300
NAPLES, FL 34109 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: MAC ALPINE, KENNETH D
Address: 1415 PANTHER LANE SUITE 402
City-St-Zip: NAPLES, FL 34109

Title: MGR () Change (X) Addition
Name: PEARS, DENISE A
Address: 1415 PANTHER LANE SUITE 402
City-St-Zip: NAPLES, FL 34109

Title: MGR () Change (X) Addition
Name: SHEPHERD, PATRICIA A
Address: 1415 PANTHER LANE SUITE 402
City-St-Zip: NAPLES, FL 34109

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: KENNETH D. MACALPINE

MGRM

03/07/2009

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