

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000093115

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

**Entity Name:** SHREE LAXMI OF NAPLES LLC

**Current Principal Place of Business:**

3345 FOWLER STREET  
FORT MYERS, FL 33901 US

**New Principal Place of Business:**

2355 VANDERBILT BEACH ROAD  
158  
NAPLES, FL 34109 US

**Current Mailing Address:**

3345 FOWLER STREET  
FORT MYERS, FL 33901 US

**New Mailing Address:**

5348 18TH CT SW  
NAPLES, FL 34116 US

**FEI Number:** 26-3468660

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCLEOD, RODERICK D  
3345 FOWLER STREET  
FORT MYERS, FL 33901 US

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

JUANA, LEON  
5348 18TH CT SW  
NAPLES, FL 34116 US

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: JUANA LEON

03/22/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LEON, JUANA  
Address: 5348 18TH CT SW  
City-St-Zip: NAPLES, FL 34116 US

Title: MGRM  
Name: FRANCO, ALBERTO  
Address: 5348 18TH CT SW  
City-St-Zip: NAPLES, FL 34116

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: JUANA LEON

MGRM

03/22/2012

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