

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000023743

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** NAPLES BUSINESS SUITES, LLC

**Current Principal Place of Business:**

5100 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103 US

**New Principal Place of Business:**

999 VANDERBILT BEACH ROAD  
SUITE 200  
NAPLES, FL 34108 US

**Current Mailing Address:**

5100 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103 US

**New Mailing Address:**

999 VANDERBILT BEACH ROAD  
SUITE 200  
NAPLES, FL 34108 US

**FEI Number:** 26-4629977

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COYLE, JOHN L  
5100 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103 US

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

ALDRIDGE, PETER B  
999 VANDERBILT BEACH ROAD  
NAPLES, FL 34108 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: PETER B. ALDRIDGE

01/11/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: COYLE, JOHN L  
Address: 999 VANDERBILT BEACH ROAD  
City-St-Zip: NAPLES, FL 34108 US

Title: MGRM  
Name: ALDRIDGE, PETER  
Address: 999 VANDERBILT BEACH ROAD  
City-St-Zip: NAPLES, FL 34108 US

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: PETER B. ALDRIDGE

MGRM

01/11/2010

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