

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000003247

**FILED**  
**Feb 11, 2011**  
**Secretary of State**

**Entity Name:** NAPLES HOTEL GROUP LLC

**Current Principal Place of Business:**

7569 CORDOBA CIRCLE  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

7569 CORDOBA CIRCLE  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 27-1642242

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREGORY, NEIL  
850 PARK SHORE DRIVE  
TRIANON CENTER , THIRD FLOOR  
NAPLES, FL 34103 US

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

GREGORY, NEIL  
41001 TAMiami TR NORTH  
STE 250  
NAPLES, FL 34103 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:** C. NEIL GREGORY

02/11/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** BOU-SLIMAN, MICHAEL G  
**Address:** 7569 CORDOBA CIRCLE  
**City-St-Zip:** NAPLES, FL 34109

**Title:** MGRM  
**Name:** BOU-SLIMAN, HAYLEY L  
**Address:** 7569 CORDOBA CIRCLE  
**City-St-Zip:** NAPLES, FL 34109

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:** MICHAEL BOU-SLIMAN

MGR

02/11/2011

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