

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000074485

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** PATRICIA N. MCCLIMANS LLC

**Current Principal Place of Business:**

6180 CYPRESS HOLLOW WAY  
NAPLES, FL 34109

**New Principal Place of Business:**

3200 BAILEY LANE  
SUITE 158  
NAPLES, FL 34105

**Current Mailing Address:**

6180 CYPRESS HOLLOW WAY  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 27-3568235

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCCLIMANS, PATRICIA N  
6180 CYPRESS HOLLOW WAY  
NAPLES, FL 34109 US

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

MCCLIMANS, PATRICIA N  
3200 BAILEY LANE, SUITE 158  
NAPLES, FL 34105 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: PATRICIA N. MCCLIMANS

02/16/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MCCLIMANS, PATRICIA N  
Address: 6180 CYPRESS HOLLOW WAY  
City-St-Zip: NAPLES, FL 34109 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: PATRICIA N. MCCLIMANS

MGRM

02/16/2011

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