

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000075820

Entity Name: QUADPLEX, LLC

**FILED**  
**Jan 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

13500 POWERS COURT  
FORT MYERS, FL 33912

**New Principal Place of Business:**

13500 POWERS COURT, SUITE 200  
FORT MYERS, FL 33912

**Current Mailing Address:**

13500 POWERS COURT  
FORT MYERS, FL 33912

**New Mailing Address:**

13500 POWERS COURT, SUITE 200  
FORT MYERS, FL 33912

FEI Number: 27-6758149

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLASP INC.  
3001 TAMIAMI TRAIL NORTH, SUITE 400  
NAPLES, FL 34103 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: MGR  
Name: DWYER, NANCY L  
Address: 13500 POWERS COURT, SUITE 200  
City-St-Zip: FORT MYERS, FL 33912

Title: MGR  
Name: MONTERO, THERESA  
Address: 13500 POWERS COURT, SUITE 200  
City-St-Zip: FORT MYERS, FL 33912

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: NANCY L DWYER

MGR

01/14/2011

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