

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000090165

Entity Name: N. BOLOGNESE, LLC

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4610 SAINT CROIX LN  
#1023  
NAPLES, FL 34109

**New Principal Place of Business:**

3971 VIA DEL REY  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

4610 SAINT CROIX LN  
#1023  
NAPLES, FL 34109

**New Mailing Address:**

FEI Number: 27-3335296

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BOLOGNESE, NANCY L  
4610 SAINT CROIX LN  
#1023  
NAPLES, FL 34109 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: MGRM  
Name: BOLOGNESE, NANCY L  
Address: 4610 SAINT CROIX LN #1023  
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: NANCY L BOLOGNESE

PRES

01/06/2012

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