

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000091973

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** NAPLES ADVISORY GROUP LLC

**Current Principal Place of Business:**

200 SPRINGLINE DR  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

200 SPRINGLINE DR  
NAPLES, FL 34102

**New Mailing Address:**

**FEI Number:** 38-3820999

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MURPHY, KEVIN P  
200 SPRINGLINE DR  
NAPLES, FL 34102 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: MURPHY, KEVIN P  
Address: 200 SPRINGLINE DR  
City-St-Zip: NAPLES, FL 34102

Title: MGRM  
Name: REED, CHRISTOPHER T  
Address: 309 WHITE OAK SHADE RD  
City-St-Zip: NEW CANAAN, CT 06840

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: KEVIN MURPHY

MGRM

04/28/2012

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