

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000096812

Entity Name: NAPLES GOURMET LLC

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

269 WILLOUGHBY DR. EXT  
NAPLES, FL 34110

**New Principal Place of Business:**

11121 HEALTH PARK BLVD  
SUITE 900  
NAPLES, FL 34110

**Current Mailing Address:**

269 WILLOUGHBY DR. EXT  
NAPLES, FL 34110

**New Mailing Address:**

FEI Number: 27-3570876      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MINARIK, JULIUS  
269 WILLOUGHBY DR, EXT  
NAPLES, FL 34110      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: MINARIK, JULIUS  
Address: 269 WILLOUGHBY DR. EXT  
City-St-Zip: NAPLES, FL 34110

Title: MGRM  
Name: MINARIK, MARTINA  
Address: 269 WILLOUGHBY DR. EXT  
City-St-Zip: NAPLES, FL 34110

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: MARTINA MINARIK

MNGR

04/20/2011

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