FILE NOW: Fee after May 1, will be \$588.75

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LIMITED LIABILITY COMPANY ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			FILED 97 FEB 10 PM 3: 04			
FILING FEE Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee							31160	10 111 3	• 04	
1. Name and Malling Address of Limited Liability Company DOCUMENT #L9500000157							SLORE (ANY OF STATE TALLAHASSEE, FLORID A			
NAPLES LAND COMPANY, L.C.							1a. Principal P	lace of Business	Address	
8211 COLLEGE PARKWAY FORT MYERS FL 33919								LEGE PA		
	mailing address is pal Place of Bus		ct Information and enter correction in Block 2a.			3. Date Organi	zed or Qualified	3s. State of Formation		
Z. Fillopa Face of Dashrood				ining Fraulous			03/02/19		FL	
Sulte, Apt. #, etc. Suite, A				Apt. #, etc.			4. FEI Number			
City & State City &				State			65-0561		Applied	
							APPHIED-		Not App	
Zip	D Country		Zip	Žip C		ry	5. Date of Last 02/12/19	•	6. Certificate of Status D	
	7. Name	and Address of Current	Registered	Agent		Name	8. Name and Ad	dress of New Re	gistered Agent	
3211		PARKWAY L 33919	Street Address (P.O. Box Suite, Apt. #, etc. City				Zip Code			
						<u> </u>		<u> </u>		
its registe	ored office or regi ered agent, and	sions of Sections 608.416 a stered agent, or both, in the accept the obligations.	State of Flo	ative vote of a majo						
10. Title Managing Members/Managers				(NOTE: Registered Agent signature required when reinstating						
IGR JASSY, JOHN D EM CAPALDI, TOM EM COLOSIMO, JAMES R EM BARBER, ROBERT S			16577 BEAR CLUB COURT 21550 River Ranch Road 895 TURTLE COURT 2679 ROBARTS 4099 TAMIAMI TRAIL 1 16577 BEAR CUB COURT 21550 River Ranch Road 895 TURTLE COURT			TROY MI 48098 I., #30 NAPLES FL S.W. FORT-MYERS-EL-				
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.										
SIGNATURE: SKINATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Date Designe Proce &										