2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L98000001711

1. Entity Name IBIS OF NAPLES, L.L.C.



FILED Apr 04, 2007 08:00 Al Secretary of State

Principal Place of Business

600 5TH AVENUE SOUTH

SUITE 210 NAPLES, FL 34102 Mailing Address

600 5TH AVENUE SOUTH SUITE 210

NAPLES, FL 34102



DO NOT WRITE IN THIS SPACE

02212007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0861000 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

WASMER, MARTIN M 600 5TH AVENUE SOUTH **SUITE 210** NAPLES, FL 34102

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8.	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.	t am familiar with, and accept
	the obligations of registered agent.	

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

SIGNATURE

U000000689516 04/11/07-80039-006 55.00

DATE

MANAGING MEMBERS/MANAGERS 9. MGR TITLE WASMER, MARTIN M NAME 600 5TH AVENUE SOUTH, SUITE 210 STREET ADDRESS NAPLES, FL 34102 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this 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.

STREET ADDRESS CITY-ST-ZIP