

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002984

**FILED**  
**Apr 18, 2008**  
**Secretary of State**

**Entity Name:** EMERALD T ENTERPRISES, L.L.C.

**Current Principal Place of Business:**

450 BAYFRONT PLACE  
4303  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

450 BAYFRONT PLACE  
4303  
NAPLES, FL 34102

**New Mailing Address:**

**FEI Number:** 13-4042555      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WOOD, DOUGLAS A  
1000 NORTH TAMIAMI TRAIL, SUITE 201  
NAPLES, FL 34102 US

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

WOOD, DOUGLAS A  
1000 NORTH TAMIAMI TRAIL  
NAPLES, FL 34102 US

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: \_\_\_\_\_ 04/18/2008  
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DELUCA, TERESE E  
Address: 450 BAYFRONT PLACE #4303  
City-St-Zip: NAPLES, FL 34102

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: TERESE E. DELUCA MGRM 04/18/2008  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date