

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000002525

Entity Name: COBBCORP, L.L.C.

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

800 LAUREL OAK DR
STE 210
NAPLES, FL 34108

New Principal Place of Business:

7400 TAMIAMI TRAIL NORTH
SUITE 102
NAPLES, FL 34108

Current Mailing Address:

800 LAUREL OAK DR
STE 210
NAPLES, FL 34108

New Mailing Address:

7400 TAMIAMI TRAIL NORTH
SUITE 102
NAPLES, FL 34108

FEI Number: 59-3574455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COBB, BRIAN
800 LAUREL OAK DR 210
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

COBB, BRIAN
7400 TAMIAMI TRAIL NORTH
SUITE 102
NAPLES, FL 34108 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: BRIAN COBB

04/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COBB, BRIAN
Address: 800 LAUREL OAK DR 210
City-St-Zip: NAPLES, FL 34108

Title: T () Delete
Name: KUSZLYK, JEANETTE
Address: 800 LAUREL OAK DR 210
City-St-Zip: NAPLES, FL 34108

Title: S () Delete
Name: COBB, DENISE
Address: 800 LAUREL OAK DR 210
City-St-Zip: NAPLES, FL 34108

Title: VP () Delete
Name: LECLAIR, DENIS
Address: 800 LAUREL OAK DR 210
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COBB, BRIAN
Address: 7400 TAMIAMI TRAIL NORTH SUITE 102
City-St-Zip: NAPLES, FL 34108

Title: T (X) Change () Addition
Name: KUSZLYK, JEANETTE
Address: 7400 TAMIAMI TRAIL NORTH SUITE 102
City-St-Zip: NAPLES, FL 34108

Title: S (X) Change () Addition
Name: COBB, DENISE
Address: 7400 TAMIAMI TRAIL NORTH #102
City-St-Zip: NAPLES, FL 34108

Title: VP (X) Change () Addition
Name: LECLAIR, DENIS
Address: 7400 TAMIAMI TRAIL NORTH #102
City-St-Zip: NAPLES, FL 34108

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: BRIAN COBB

MGRM

04/03/2009

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