

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000007560

Entity Name: STONEWOOD NAPLES, LLC

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7935 AIRPORT PULLING RD  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

780 W GRANADA BLVD  
SUITE 100  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 59-3634115

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCBRIDE, COLETTE J  
780 W GRANADA BLVD  
SUITE 100  
ORMOND BEACH, FL 32174 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: STONEWOOD RESTAURANT GROUP  
Address: 780 W GRANADA BLVD, SUITE 100  
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR  
Name: LEMERAND, GALE  
Address: 103B NORTH LAKE DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR  
Name: MCBRIDE, COLETTE J  
Address: 780 W GRANADA BLVD, SUITE 100  
City-St-Zip: ORMOND BEACH, FL 32174

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: COLETTE J MCBRIDE

MGR

05/01/2012

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