


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2005 08:00 AM
Secretary of State

DOCUMENT # M02000002753	
1. Entity Name MARINELLA INVESTMENTS, LLC	

Principal Place of Business C/O CORPORATION STE 2700 CENTERVILLE RD WILMINGTON, DE 19808	Mailing Address 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19808
--	--

DO NOT WRITE IN THIS SPACE



04012005No Chg-LLC CR2E083 (10/03)

4. FEI Number 38-3661860	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent WALDORF, DOUGLAS L JR HENDERSON, FRANKLIN, STARNES & HOLT, P.A. 1715 MONROE STREET FT. MYERS, FL 33901
--

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of re...

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and tax preparer</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
---	--	------------

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARINELLA, SABINO 14 LOUIS DRIVE WELLESLEY, MA 02481
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000001296156
04/09/05-80068-011 50.00

DO NOT WRITE IN THIS SPACE

11. I 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 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.

SIGNATURE: <i>Sabino Marinella</i> SABINO MARINELLA 4/13/05 781-235-2264	Signature AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date	Daytime Phone #
---	--	------	-----------------