

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000006755

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** OASIS NAPLES APARTMENTS LLC

**Current Principal Place of Business:**

2277 ARBOUR WALK CIRCLE  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

2277 ARBOUR WALK CIRCLE  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 75-3260742

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUNCH, EILEEN K PM  
2277 ARBOUR WALK CIRCLE  
NAPLES, FL 34109 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:** SMITH, A. BRITTON  
**Address:** 80 JOHNSON STREET KINGSTON, ONTARIO  
**City-St-Zip:** CANADA K7L 1X7,

**Title:** MGRM  
**Name:** MOORE, FRANCINE  
**Address:** 80 JOHNSON STREET KINGSTON, ONTARIO  
**City-St-Zip:** CANADA K7L 1X7,

**Title:** MGRM  
**Name:** HENDRY, ALFRED G  
**Address:** 80 JOHNSON STREET KINGSTON, ONTARIO  
**City-St-Zip:** CANADA K7L 1X7,

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:** EILEEN K. BUNCH

PM

02/16/2011

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