

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000000014

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: MONARCH PROPERTIES OF NAPLES, LLC.

**Current Principal Place of Business:**

7150 COLUMBIA GATEWAY DRIVE  
SUITE J  
COLUMBIA, MD 21046

**New Principal Place of Business:**

7150 COLUMBIA GATEWAY DRIVE  
SUITE J  
COLUMBIA, MD 21046

**New Mailing Address:**

FEI Number: 59-3545811      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MGR ( ) Delete  
Name: POOLE, JOHN  
Address: 12190 WELLESLEY CT.  
City-St-Zip: FT. MYERS, FL 33913

Title: MGR ( ) Delete  
Name: TRYBUS, TIMOTHY J  
Address: 7150 COLUMBIA GATEWAY DRIVE, SUITE J  
City-St-Zip: COLUMBIA, MD 21046

Title: MGR ( ) Delete  
Name: AUMAN, MATTHEW F  
Address: 7150 COLUMBIA GATEWAY DRIVE, SUITE J  
City-St-Zip: COLUMBIA, MD 21046

Title: MGRM ( ) Delete  
Name: NICHOLSON, TIMOTHY  
Address: 304 GILBERT ROAD  
City-St-Zip: DILLSBURG, PA 17019

**ADDITIONS/CHANGES:**

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

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

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

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: TIM TRYBUS

MGR

03/23/2009

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