

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000033445

**Entity Name:** PSA OF NAPLES, LLC

**Current Principal Place of Business:**

3142 DAHLIA WAY  
NAPLES, FL 34105

**Current Mailing Address:**

3142 DAHLIA WAY  
NAPLES, FL 34105

**FEI Number:** 27-2197708

**Certificate of Status Desired:** No

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

CONROY, J. THOMAS III  
2210 VANDERBILT BEACH ROAD  
1201  
NAPLES, FL 34109 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	ALLEN, PAUL H	Name	ALLEN, SANDRA C
Address	3142 DAHLIA WAY	Address	3142 DAHLIA WAY
City-State-Zip:	NAPLES FL 34105	City-State-Zip:	NAPLES FL 34105

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAUL ALLEN

**PRESIDENT**

**01/13/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date