

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000053816

Entity Name: SNS OF NAPLES, LLC

Current Principal Place of Business:

6632 STONEGATE DRIVE
NAPLES, FL 34109

Current Mailing Address:

6632 STONEGATE DRIVE
NAPLES, FL 34109

FEI Number: 37-1640688

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DENTI, KEVIN AESQ.
C/O KEVIN A. DENTI, P.A.
2180 IMMOKALEE ROAD, SUITE #316
NAPLES, FL 34110 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	MGR	Title	MGR
Name	SADEZ, EMILIO J	Name	SADEZ, LINDA L
Address	6632 STONEGATE DRIVE	Address	6632 STONEGATE DRIVE
City-State-Zip:	NAPLES FL 34109	City-State-Zip:	NAPLES FL 34109

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: EMILIO SADEZ _____

MEMBER

01/08/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date