

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000056187

**Entity Name:** GRAPE ESCAPES OF NAPLES, LLC

**Current Principal Place of Business:**

5630 STANDING OAKS LANE  
NAPLES, FL 34119

**Current Mailing Address:**

5630 STANDING OAKS LANE  
NAPLES, FL 34119

**FEI Number:** 45-5142975

**Certificate of Status Desired:** No

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

GRANT, SCOTT MESQ.  
SCOTT M. GRANT, P.A.  
3400 TAMiami TRAIL N., SUITE 201  
NAPLES, FL 34103 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  
Name GRAVES, CATHY JEAN  
Address 5630 STANDING OAKS LANE  
City-State-Zip: NAPLES FL 34119

*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:** CATHY JEAN GRAVES

MANAGING MEMBER

02/24/2015

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

\_\_\_\_\_ Date