AGENT

SIGNATURE: DAVID F WILLIAMS

Electronic Signature of Signing Authorized Person(s) Detail

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000041225

Entity Name: 3022 SE SANTA BARBARA PLACE, LLC

## **Current Principal Place of Business:**

3022 SE SANTA BARBARA PLACE CAPE CORAL, FL 33904

## **Current Mailing Address:**

C/O SILVERFOX TOURS, INC. P O BOX 7187 ATLANTIC CITY, NJ 08404 US

# FEI Number: 20-1186410

## Name and Address of Current Registered Agent:

WILLIAMS, DAVID 3022 SE SANTA BARBARA PLACE CAPE CORAL, FL 33904 US

Jan 27, 2013 Secretary of State CC8005148728

Date

FILED

Certificate of Status Desired: No

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

## Authorized Person(s) Detail :

MGR	Title	MGRM
WILLIAMS, DAVID	Name	WILLIAMS, FRANK
100 EAST UPLAND AVENUE	Address	2645 STONY HILL COURT
GALLOWAY NJ 08205	City-State-Zip:	CAPE CORAL FL 33991
	MGR WILLIAMS, DAVID 100 EAST UPLAND AVENUE	MGRTitleWILLIAMS, DAVIDName100 EAST UPLAND AVENUEAddress

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

01/27/2013

Date