## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000074074

Entity Name: ALL SEASONS PS LLC

**Current Principal Place of Business:** 

3420 WILLARD STREET FORT MYERS, FL 33916

**Current Mailing Address:** 

3420 WILLARD STREET FORT MYERS, FL 33916 US

FEI Number: 45-2580964 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOURAS, VICTOR 12730 NEW BRITTANY BLVD. 434 FORT MYERS, FL 33919 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

FILED Mar 18, 2013

**Secretary of State** 

CC7478606824

Authorized Person(s) Detail:

Title MGRM Title MGR

NameDEPALMA, JOSEPHNameDEPALMA, MICHELEAddress3420 WILLARD STREETAddress3420 WILLARD STREETCity-State-Zip:FORT MYERS FL 33916City-State-Zip:FORT MYERS FL 33916

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.

SIGNATURE: JOSEPH DEPALMA

Electronic Signature of Signing Authorized Person(s) Detail

OWNER

03/18/2013