

2014 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:

MADIA, JOSEPH
1136 NE PINE ISLAND ROAD
CAPE CORAL, FL 33909 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: JOSEPH MADIA

01/10/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name DEPALMA, JOSEPH
Address 3420 WILLARD STREET
City-State-Zip: FORT MYERS FL 33916

Title MGR
Name DEPALMA, MICHELE
Address 3420 WILLARD STREET
City-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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH DEPALMA

MANAGER

01/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date