

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000092489

**Entity Name:** CK SANIBEL, LLC**Current Principal Place of Business:**122 STEVENS ST  
N. ANDOVER, MA 01845**Current Mailing Address:**122 STEVENS ST  
N. ANDOVER, MA 01845**FEI Number:** 47-4242148**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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	RONAYNE, JOHN J
Address	122 STEVENS ST
City-State-Zip:	N. ANDOVER MA 01845

Title	AMBR
Name	RONAYNE, JOHN J
Address	122 STEVENS ST
City-State-Zip:	N. ANDOVER MA 01845

Title	MGR
Name	MCLELLAN, KEVIN B
Address	158 DALE ST
City-State-Zip:	N. ANDOVER MA 01845

Title	AMBR
Name	MCLELLAN, KEVIN B
Address	158 DALE ST
City-State-Zip:	N. ANDOVER MA 01845

*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:** JOHN RONAYNE

LLC MEMBER MANAGER 04/14/2016

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