

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000167523

Entity Name: BUCCANEER BEACH, LLC**Current Principal Place of Business:**1748 SCOTT ROAD
AMELIA ISLAND, FL 32034**Current Mailing Address:**1748 SCOTT ROAD
AMELIA ISLAND, FL 32034 US**FEI Number:** 81-1338433**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CRISP, BARBARA M
1748 SCOTT ROAD
AMELIA ISLAND, FL 32034 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:** BARBARA M. CRISP

03/25/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGING MEMBER
Name CRISP, BARBARA M
Address 1748 SCOTT ROAD
City-State-Zip: AMELIA ISLAND FL 32034

Title AMBR
Name WATSON, JIM
Address 1748 SCOTT ROAD
City-State-Zip: AMELIA ISLAND FL 32034

Title AMBR
Name TOWERS, BILLY
Address 1748 SCOTT ROAD
City-State-Zip: AMELIA ISLAND FL 32034

Title AMBR
Name TOWERS, JOHN
Address 1748 SCOTT ROAD
City-State-Zip: AMELIA ISLAND FL 32034

Title TREASURER
Name HASLAM, JOHN H
Address 100 RIVERVIEW DRIVE
City-State-Zip: SAVANNAH GA 31404

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: BARBARA M. CRISP**REGISTERED AGENT**

03/25/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date