

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000165989

**Entity Name:** SHORELINE AMUSEMENTS LLC

**Current Principal Place of Business:**

21332 WALLING CT  
PORT CHARLOTTE, FL 33954

**Current Mailing Address:**

PO BOX 512003  
PUNTA GORDA, FL 33951 US

**FEI Number: 81-3801224**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ROMPRE, HOWARD  
21332 WALLING CT  
PORT CHARLOTTE, FL 33954 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:** HOWARD ROMPRE

06/24/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name THE ESTATE OF JAMES T. MAINOR,  
JR  
Address PO BOX 512003  
City-State-Zip: PUNTA GORDA FL 33951

*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:** CLAYTON B STUDSTILL

ATTORNEY

06/24/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date