that my name appears above, or on an attachment with all other like empowered. 01/17/2020

SIGNATURE: MARY FREITAS Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L18000167799

Entity Name: BONNER BAR AT FAIRWINDS GOLF COURSE LLC

Current Principal Place of Business:

4400 FAIRWINDS DRIVE FORT PIERCE, FL 34946

Current Mailing Address:

473 WATERS DRIVE FORT PIERCE, FL 34946 US

FEI Number: 83-1187708

Name and Address of Current Registered Agent:

FREITAS, MARY 473 WATERS DRIVE FORT PIERCE, FL 34946 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: MARY FREITAS

Authorized Person(s) Detail :

- Title AMBR Name BONNER MOBILE BAR SERVICE LLC Address **473 WATERS DRIVE** City-State-Zip: FORT PIERCE FL 34946
- Electronic Signature of Registered Agent

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 OWNER

FILED Jan 17, 2020

Secretary of State

9185134635CC

Certificate of Status Desired: No

01/17/2020 Date

Date

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT