

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000144969

**Entity Name:** VOLCANO MOUNTAIN ADVENTURE GOLF LLC

**Current Principal Place of Business:**

9001 SAGE AVENUE  
NAPLES, FL 34120

**Current Mailing Address:**

9001 SAGE AVENUE  
NAPLES, FL 34120 US

**FEI Number: 88-1682936**

**Certificate of Status Desired: No**

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

BRYANT, MARIA  
12420 PEBBLE STONE COURT  
FORT MYERS, FL 33913 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            MGBM  
Name            FORGET, ROBERT J JR.  
Address        401 QUAY COMMONS, SUITE 805  
City-State-Zip: SARASOTA FL 34326

Title            MBRB  
Name            FORGET, ROBERT J III  
Address        2642 18TH AVE NE  
City-State-Zip: NAPLES FL 34120

Title            MGBM  
Name            FORGET, PATRICK G  
Address        519 BRACKENBERRY LANE  
City-State-Zip: CHARLOTTE NC 28270

Title            MBRB  
Name            FORGET, KEVIN M  
Address        4416 STEINBECK WAY  
City-State-Zip: AVE MARIA FL 34142

*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: ROBERT FORGET**

**MGMB**

**04/25/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date