

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000296931

Entity Name: SUGARSHACK DOWNTOWN LLC**Current Principal Place of Business:**1076 BUSINESS LN.
2
NAPLES, FL 34110**Current Mailing Address:**1076 BUSINESS LN.
2
NAPLES, FL 34110**FEI Number:** 99-1692824**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CASEMENT, ALEXANDER J
2405 13TH ST. N
NAPLES, FL 34103 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 AMBR
Name CASEMENT, ALEXANDER
Address 2405 13TH ST. N
City-State-Zip: NAPLES FL 34103Title AMBR
Name KOPP, EDWARD
Address 10240 KENTUCKY ST.
City-State-Zip: BONITA SPRINGS FL 34135Title AMBR
Name ANTONUCCI, ARIAN
Address 18622 CEDAR DRIVE E
City-State-Zip: FORT MYERS FL 33967Title AMBR
Name PATERSON, EDWARD
Address 4205 SPRINGS LN.
City-State-Zip: BONITA SPRINGS FL 34134Title AMBR
Name ALPERT, DAVID
Address 26305 BONITA FAIRWAYS BLVD.
City-State-Zip: BONITA SPRINGS FL 34135Title AMBR
Name KACZMAREK, JUSTIN
Address 141 1ST ST.
City-State-Zip: BONITA SPRINGS FL 34134Title AMBR
Name SUGARSHACK MEDIA LLC
Address 1076 BUSINESS LN.
2
City-State-Zip: NAPLES FL 34110

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: ALEXANDER CASEMENT

AMBR

03/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date