2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 12, 2021
Secretary of State
9387164216CC

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Entity Name: SAI FORT MYERS M, LLC

Current Principal Place of Business:

15461 S TAMIAMI TRAIL
FORT MYERS, FL 33908

Current Mailing Address:

4401 COLWICK ROAD
CHARLOTTE, NC 28211 US

FEI Number: 59-3535971

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	P/M
Name	SMITH, DAVID B.
Address	4401 COLWICK ROAD
City-State-Zip:	CHARLOTTE NC 28211

Title	VP/T/M
Name	BYRD, HEATH R.
Address	4401 COLWICK ROAD
City-State-Zip:	CHARLOTTE NC 28211

Title	VP
Name	RUSS, JOHN E. III
Address	4401 COLWICK ROAD
City-State-Zip:	CHARLOTTE NC 28211

Title	S
Name	COSS, STEPHEN K.
Address	4401 COLWICK ROAD
City-State-Zip:	CHARLOTTE NC 28211

Title	ASAT
Name	JOHNSON, CAROLYN
Address	4401 COLWICK ROAD
City-State-Zip:	CHARLOTTE NC 28211

Title	AS
Name	SIGAFOES, SHELLEY
Address	13880 S. TAMIAMI TRAIL
City-State-Zip:	FORT MYERS FL 33912

Title	VP
Name	BYRD, BERNARD C.
Address	4401 COLWICK ROAD
City-State-Zip:	CHARLOTTE NC 28211

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: HEATH R BYRD TREASURER 05/12/2021

Electronic Signature of Signing Authorized Person(s) Detail — Date