

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 21, 2003 8:00 am**  
**Secretary of State**

02-27-2003 90001 037 \*\*\*\*55.00

DOCUMENT # L00000002389

1. Entity Name

**M-31 MARINA LLC**

*Sweetwater-Landing, LLC*



Principal Place of Business

3451 BONITA BAY BLVD., SUITE 202  
BONITA SPRINGS FL 34134

Mailing Address

3451 BONITA BAY BLVD., SUITE 202  
BONITA SPRINGS FL 34134

2. Principal Place of Business

**9990 Coconut Rd.**

Suite, Apt. #, etc.

**200**

City & State

**Bonita Springs FL**

Zip

**34135**

Country

**USA**

3. Mailing Address

**9990 Coconut Rd.**

Suite, Apt. #, etc.

**200**

City & State

**Bonita Springs FL**

Zip

**34135**

Country

**USA**



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0989144**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**RESOURCE CONSERVATION PROPERTIES, INC.**  
**3451 BONITA BAY BLVD., SUITE 202**  
**BONITA SPRINGS FL 34134**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

**9990 Coconut Road**

**Suite 200**

City

**Bonita Springs**

FL

Zip Code

**34135**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**

**Make Check Payable to Florida Department of State**  
**Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE **M** ☐ Delete  
NAME **RESOURCE CONSERVATION PROPERTIES, INC.**  
STREET ADDRESS **3451 BONITA BAY BLVD., STE 202**  
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGRM** ☒ Change ☐ Addition  
NAME **Resource Conservation Properties, Inc**  
STREET ADDRESS **9990 Coconut Rd., Ste 200**  
CITY-ST-ZIP **Bonita Springs FL 34135**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE: *Resource Conservation Properties*  
*VP Finance* 1/31/03 239-495-1000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone