2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000017816

City-St-Zip:

Entity Name: SANDALS BED & BREAKFAST, LLC

FILED Apr 30, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 106 NORTH O STREET 106 NORTH O STREET LAKE WORTH, FL 33461 LAKE WORTH, FL 33460 **Current Mailing Address: New Mailing Address:** 106 NORTH O STREET 106 NORTH O STREET LAKE WORTH, FL 33461 LAKE WORTH, FL 33460 **FEI Number:** FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TROJAN, R.W. 106 NORTH O STREET LAKE WORTH, FL 33461 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 **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** () Delete () Change (X) Addition TROJAN, ROBERT W Name: Name: Address: Address: 106 NORTH O STREET City-St-Zip: City-St-Zip: LAKEWORTH, FL 33460 Title: Title: MGRM () Change (X) Addition () Delete Name: Name: TERRY, KATHERINE M Address: Address: 14418 WELLINGTON TRACE City-St-Zip: City-St-Zip: WELLINGTON, FL 33414 Title: () Delete Title: MGRM () Change (X) Addition Name: TROJAN, KIN Name: 14418 WELLINGTON TRACE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 608, Florida Statutes.

City-St-Zip:

WELLINGTON, FL 33414

SIGNATURE: ROBERT W. TROJAN MGRM 04/30/2002