

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000000530

**FILED**  
**Mar 15, 2010**  
**Secretary of State**

**Entity Name:** S & S OF SOUTHWEST FLORIDA, LLC

**Current Principal Place of Business:**

6400 TECHSTER BOULEVARD  
FORT MYERS, FL 33966

**New Principal Place of Business:**

**Current Mailing Address:**

6400 TECHSTER BOULEVARD  
FORT MYERS, FL 33966

**New Mailing Address:**

**FEI Number:** 01-0626872

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COSTELLO, TRUMAN J ESQUIRE  
BRITTANY PROFESSIONAL CENTER  
12670 NEW BRITTANY BLVD., SUITE 101  
FORT MYERS, FL 33907 US

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

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/MANAGERS:**

**Title:** P  
**Name:** MARINO, STEVEN L  
**Address:** 6400 TECHSTER BLVD.  
**City-St-Zip:** FORT MYERS, FL 33966

**Title:** MGRM  
**Name:** MARINO, SHARON L  
**Address:** 450 KNIGHTS RUN AVENUE #1704  
**City-St-Zip:** TAMPA, FL 33602

I hereby 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.

**SIGNATURE:** STEVEN L MARINO

P

03/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date