

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000013741

Entity Name: SS RIDES, LLC

**FILED**  
**May 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

606 BEAL PKWY  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

369 BEAL PKWY  
FORT WALTON BEACH, FL 32548

**Current Mailing Address:**

606 BEAL PKWY  
FORT WALTON BEACH, FL 32548

**New Mailing Address:**

FEI Number: 27-4677584

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WEHUNT, DELINDA  
208 RUCKEL DRIVE  
NICEVILLE, FL 32578 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: MGRM  
Name: TAWFIK, CHERYL  
Address: 907 LIGHTHOUSE RD  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGRM  
Name: WEHUNT, DELINDA  
Address: 208 RUCKEL DRIVE  
City-St-Zip: NICEVILLE, FL 32578

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: DELINDA WEHUNT

MGR

05/02/2012

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