

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

1. Entity Name

S.S. Resort Management, L.C.

L94-285

FILED

01 AUG -6 AM 8:47

Principal Place of Business

Mailing Address

12800 University Drive
Suite 260
Ft. Myers, FL 33907-5344

12800 University Drive
Suite 260
Ft. Myers, FL 33907-5344

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

12800 University Drive

3. Mailing Address

12800 University Drive

Suite, Apt. #, etc.

Suite 260

Suite, Apt. #, etc.

Suite 260

City & State

Ft. Myers, FL

City & State

Ft. Myers, FL

Zip

33907

Country

Zip

33907

Country

4. FEI Number

65-0509172

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Krichbaum, Richard E
8961 Conference Drive
Ft. Myers, FL 33919

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

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: Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
Taylor, Robert M
12800 University Drive Suite 260
Ft. Myers, FL 33907 ☐ Delete

TITLE
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☐ Change ☐ Addition

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

CR2E083 (11/00)