## FILED LIMITED LIABILITY COMPANY May 30, 2002 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR) DOCUMENT #** 05-30-2002 91595 013 \*\*\*\*50.00 Inns By The Sea LLC DBA Carousel Inn on The Beach DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 6230 Estero Blvd Suite, Apt. #, etc. Same Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-09585 14 Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE James Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 936 N. 869 41. 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. DATE FEE IS \$50.00 Make Check Payable to Department of State **DUE BY MAY 1** MANAGING MEMBERS/MANAGERS MGR TITLE TITLE Pohlamann, Herbert C. 4230 Estero Bludi Et Myers Beuch, Fl 3. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Lear, Jon W. 6230 Estero Blud NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P Myers Beach, Fl 33931 CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS

## CITY-ST-ZIP CITY-\$T-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.

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