

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000007940

Entity Name: SSBL, L.C.

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1133 BAL HARBOR BOULEVARD, SUITE 1129  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

1133 BAL HARBOR BOULEVARD, SUITE 1129  
PUNTA GORDA, FL 33950

**New Mailing Address:**

FEI Number: 65-0976748

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEFANIK, STEVEN A  
179 GRENADA STREET  
PORT CHARLOTTE, FL 33948 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: STEFANIK, STEVEN A  
Address: 179 GRENADA STREET  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MGRM  
Name: BEVIS, LYN  
Address: 1133 BAL HARBOR BLVD. #1129  
City-St-Zip: PUNTA GORDA, FL 33950

Title: MGRM  
Name: LOWA, KENNETH W  
Address: 1326 AEGEAN CT.  
City-St-Zip: PUNTA GORDA, FL 33983

Title: MGRM  
Name: SMITH, JOHN D  
Address: 8739 CYPRESS RESERVE CIRCLE  
City-St-Zip: ORLANDO, FL 32836

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 A. STEFANIK

RA

02/16/2011

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