

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90046 048 ****50.00

DOCUMENT # M05000003183

1. Entity Name
SANDY BEACH RV RESORT, LLC



Principal Place of Business
**6390 PLASTERMILL ROAD
VICTOR, NY 14564**

Mailing Address
**6390 PLASTERMILL ROAD
VICTOR, NY 14564**



2. Principal Place of Business
1170 Pittsford Victor Rd
Suite, Apt. #, etc.

3. Mailing Address
Po Box 549
Suite, Apt. #, etc.

04272006 Chg-LLC CR2E083 (11/05)

City & State
Pittsford, NY
Zip
14534 Country
USA

City & State
Pittsford, NY
Zip
14534 Country
USA

4. FEI Number
13-4275168 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**INCORPORATING SERVICES, LTD.
1540 GLENWAY DRIVE
TALLAHASSEE, FL 32301**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS / MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
MORGAE, ROBERT C
7 CHELSEA PARK
PITTSFORD, NY 14524** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
MOSER, ROBERT J
9 CRESTWOOD DRIVE
QUEENSBURY, NY 12804** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
HERBERT MORGAN I, LLC
2885 DEER CHASE LANE
YORK, PA 17403** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
SANDY BEACH RV SPE, INC.
6390 PLASTERMILL ROAD
VICTOR, NY 14564** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Morgan, Robert C
7 Chelsea Park
Pittsford NY 14534** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Po Box 549
Pittsford, NY 14534** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

Date

Daytime Phone #

Harry H. Centurion 4128106 585-419-9630