

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000100300

**Entity Name:** SUNSEEKER FLORIDA, INC.**Current Principal Place of Business:**4949 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33980**Current Mailing Address:**4949 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33980 US**FEI Number: 38-4056101****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US*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:**

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Electronic Signature of Registered Agent

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Date**Officer/Director Detail :**

|                 |                          |
|-----------------|--------------------------|
| Title           | DIR                      |
| Name            | ANDERSON, GREGORY        |
| Address         | 1201 N TOWN CENTER DRIVE |
| City-State-Zip: | LAS VEGAS NV 89144       |

|                 |                          |
|-----------------|--------------------------|
| Title           | SVP, CFO, TREASURER      |
| Name            | NEAL, ROBERT             |
| Address         | 1201 N TOWN CENTER DRIVE |
| City-State-Zip: | LAS VEGAS NV 89144       |

|                 |                         |
|-----------------|-------------------------|
| Title           | VP                      |
| Name            | SHKORUPA, JASON         |
| Address         | 4949 TAMIAMI TRAIL      |
| City-State-Zip: | PORT CHARLOTTE FL 33980 |

|                 |                                |
|-----------------|--------------------------------|
| Title           | SVP, SENIOR COUNSEL, SECRETARY |
| Name            | GOLDBERG, ROBERT               |
| Address         | 1201 N TOWN CENTER DRIVE       |
| City-State-Zip: | LAS VEGAS NV 89144             |

|                 |                          |
|-----------------|--------------------------|
| Title           | PRESIDENT, DIRECTOR, COO |
| Name            | RICHINS, MICAH           |
| Address         | 4949 TAMIAMI TRAIL       |
| City-State-Zip: | PORT CHARLOTTE FL 33980  |

|                 |                         |
|-----------------|-------------------------|
| Title           | VP                      |
| Name            | BERRY, PAUL             |
| Address         | 4949 TAMIAMI TRAIL      |
| City-State-Zip: | PORT CHARLOTTE FL 33980 |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ROBERT B. GOLDBERG****SECRETARY****02/06/2024**

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Electronic Signature of Signing Officer/Director Detail

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Date