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

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US Certificate of Status Desired: No

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

# Officer/Director Detail :

Title	DIR	Title	SVP, SENIOR COUNSEL, SECRETARY
Name	REDMOND, JOHN	Name	GOLDBERG, ROBERT
Address	1201 N TOWN CENTER DRIVE	Address	1201 N TOWN CENTER DRIVE
City-State-Zip:	LAS VEGAS NV 89144	City-State-Zip:	LAS VEGAS NV 89144
Title	EVP	Title	SVP, CFO, TREASURER
Name	ANDERSON, GREGORY	Name	NEAL, ROBERT
Address	1201 N TOWN CENTER DRIVE	Address	1201 N TOWN CENTER DRIVE
City-State-Zip:	LAS VEGAS NV 89144	City-State-Zip:	LAS VEGAS NV 89144
Title		Title	VP
Title	PRESIDENT, DIRECTOR, COO		
Name	RICHINS, MICAH	Name	SHKORUPA, JASON
Address	4949 TAMIAMI TRAIL	Address	4949 TAMIAMI TRAIL
City-State-Zip:	PORT CHARLOTTE FL 33980	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

06/06/2023

Date

Electronic Signature of Signing Officer/Director Detail

Date