2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005171

Entity Name: CNL LIFESTYLE PROPERTIES, INC.

FILED Mar 29, 2010 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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450 S. ORANGE AVE. ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

P.O. BOX 4920 ORLANDO, FL 328024920

FEI Number: 20-0183627 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SCARCELLI, LINDA A 450 S. ORANGE AVE. ORLANDO, FL 32801 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DO

Name: SENEFF, JAMES M JR. Address: 450 S. ORANGE AVE. City-St-Zip: ORLANDO, FL 32801

Title: DTVC

Name: BOURNE, ROBERT A Address: 450 S. ORANGE AVE. City-St-Zip: ORLANDO, FL 32801

Title: COO

Name: MULLER, CHARLES A Address: 450 S. ORANGE AVE. City-St-Zip: ORLANDO, FL 32801

Title: EVP

Name: QUINLAN, TAMMY A Address: 450 S. ORANGE AVE. City-St-Zip: ORLANDO, FL 32801

Title: AS

Name: SCARCELLI, LINDA A
Address: 450 S. ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: PCEO

Name: CARLOCK, RAYMON BYRON JR Address: 450 S. ORANGE AVENUE City-St-Zip: ORLANDO, FL 32801

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: LINDA A SCARCELLI AS 03/29/2010