2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000001724

Entity Name: WILDWOOD HOSPITALITY, L.L.C.

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

273 E. STATE ROAD 44 WILDWOOD, FL 34785

Current Mailing Address: New Mailing Address:

 273 E. STATE ROAD 44
 P.O. BOX 22175

 WILDWOOD, FL 34785
 ORLANDO, FL 32830

FEI Number: 59-3693900 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:

 JUMA, NASIRDIN H
 JUMA, NASIRDIN H

 273 E. STATE ROAD 44
 P.O. BOX 22175

 WILDWOOD, FL 34785
 US

 ORLANDO, FL 32830
 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: 04/30/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 JUMA, NASIRDIN H
 Name:
 JUMA, NASIRDIN H

 Address:
 273 E. STATE ROAD 44
 Address:
 P.O. BOX 22175

 City-St-Zip:
 WILDWOOD, FL 34785
 City-St-Zip:
 ORLANDO, FL 32830

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 DILLON, BARBARA
 Name:

 Address:
 273 E. ST RT 44
 Address:

 City-St-Zip:
 WILDWOOD, FL 34785
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: NASIRDIN JUMA MGRM 04/30/2005