

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000072972

FILED
Feb 07, 2012
Secretary of State

Entity Name: SUITE DREAMS ORLANDO, LLC

Current Principal Place of Business:

429 S. KELLER ROAD, SUITE 300
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

429 S. KELLER ROAD, SUITE 300
ORLANDO, FL 32810

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, W. RILEY
429 S. KELLER ROAD, SUITE 300
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BOLDING, RON
Address: 570 HAVERTY COURT
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGR
Name: BOLDING, BRENDA
Address: 570 HAVERTY CT
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGR
Name: ALLEN, RILEY
Address: 429 S. KELLER ROAD, SUITE 300
City-St-Zip: ORLANDO, FL 32810

Title: MGR
Name: ALLEN, MARY F
Address: 429 S. KELLER ROAD, SUITE 300
City-St-Zip: ORLANDO, FL 32810

Title: MGR
Name: BIBLIOWICZ, MIKE DR
Address: 5830 LAKE UNDERHILL RD.
City-St-Zip: ORLANDO, FL 328074311

Title: MGR
Name: RABAJA, DAVID DR
Address: 5830 LAKE UNDERHILL RD.
City-St-Zip: ORLANDO, FL 328074311

I hereby 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: RILEY ALLEN

MGR

02/07/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date