

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000012965

**Entity Name:** LAKE BUENA VISTA RESORT, LLC

**Current Principal Place of Business:**

1725 UNIVERSITY DR, STE 420  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

1725 UNIVERSITY DR, STE 420  
CORAL SPRINGS, FL 33071

**FEI Number:** 83-0387217

**Certificate of Status Desired:** No

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

SUTTON, SAMUEL RMGRM  
1725 UNIVERSITY DR #420  
CORAL SPRINGS, FL 33071 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

**Authorized Person(s) Detail :**

Title MGRM  
Name SUTTON, SAM  
Address 1725 UNIVERSITY DR #420  
City-State-Zip: CORAL SPRINGS FL 33071

Title MGR  
Name SUTTON, ROBERT  
Address 6462 CENTRAL AVENUE  
City-State-Zip: ST PETERSBURG FL 33707

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SAMUEL SUTTON

MGRM

04/24/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date