

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000002918

**Entity Name:** IDLEWILD RESORT, LLC

**Current Principal Place of Business:**

4110 NW 42ND PLACE  
LAKE PANASOFFEE, FL 33538

**Current Mailing Address:**

4110 NW 42ND PLACE  
LAKE PANASOFFEE, FL 33538 US

**FEI Number:** 46-4411545

**Certificate of Status Desired:** No

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

SMITH, WILLIAM T  
4110 NW 42ND PLACE  
LAKE PANASOFFKEE, FL 33538 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:** WILLIAM T SMITH

04/26/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SMITH, WILLIAM T  
Address 4110 NW 42ND PLACE  
City-State-Zip: LAKE PANASOFFKEE FL 33538

Title MGRM  
Name SMITH, MICHAEL R  
Address 4110 NW 42ND PLACE  
City-State-Zip: LAKE PANASOFFKEE FL 33538

*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:** WILLIAM T. SMITH

**PRESIDENT**

04/26/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date