

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000007853

**Entity Name:** CAPITAL RESORTS MANAGEMENT, LLC

**Current Principal Place of Business:**

2685 ULMERTON RD  
SUITE 101  
CLEARWATER, FL 33762

**Current Mailing Address:**

9654 N. KINGS HWY  
SUITE 101  
MYRTLE BEACH, SC 29572 US

**FEI Number:** 46-4102743

**Certificate of Status Desired:** Yes

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

REGISTERED AGENTS INC.  
3030 N ROCKY POINT DR  
STE 150A  
TAMPA, FL 33607 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 MANAGER  
Name CR MANAGER LLC  
Address 9654 N KINGS HWY  
SUITE 101  
City-State-Zip: MYRTLE BEACH SC 29572

Title CAO  
Name FEDERICO, MICHAEL  
Address 9654 N. KINGS HWY  
SUITE 101  
City-State-Zip: MYRTLE BEACH SC 29572

Title CEO  
Name SHROFF, JASON  
Address 9654 N. KINGS HWY  
SUITE 101  
City-State-Zip: MYRTLE BEACH SC 29572

Title GENERAL COUNSEL  
Name COPE, DAVID  
Address 9654 N. KINGS HWY  
SUITE 101  
City-State-Zip: MYRTLE BEACH SC 29572

*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:** KATHERINE WEIGLE

**ATTORNEY**

**02/04/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date