

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M23000004828

**Entity Name:** ORMOND BEACH RESORT HOLDINGS, LLC

**Current Principal Place of Business:**

5 CENTURY DRIVE SUITE 210  
GREENVILLE, SC 29607

**Current Mailing Address:**

5 CENTURY DRIVE SUITE 210  
GREENVILLE, SC 29607 US

**FEI Number:** 87-3783160

**Certificate of Status Desired:** No

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

URS AGENTS, LLC  
3458 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312 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 MGR  
Name ELLIOTT, FORD  
Address 115 CALAVERDI COURT  
City-State-Zip: SIMPSONVILLE SC 29681

Title AP  
Name ELLIOTT, FORD  
Address 115 CALAVERDI COURT  
City-State-Zip: SIMPSONVILLE SC 29681

Title MGR  
Name FEINGOLD, DAVID  
Address 4440 PGA BLVD SUITE 600  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title AP  
Name FEINGOLD, DAVID  
Address 4440 PGA BLVD SUITE 600  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MGR  
Name HOWARD, JOSHUA  
Address 11 BACHMAN COURT  
City-State-Zip: GREENVILLE SC 29605

Title AP  
Name HOWARD, JOSHUA  
Address 11 BACHMAN COURT  
City-State-Zip: GREENVILLE SC 29605

*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:** JOSHUA L HOWARD

**MANAGER**

**02/12/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date