

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 22, 2008 08:00 AM
Secretary of State

DOCUMENT # L00000006181

1. Entity Name
SIERRA FLORIDA HOTELS, LLC



Principal Place of Business
801 NORTH BRAND BLVD., SUITE 1010
GLENDALE, CA 91203-1243

Mailing Address
801 NORTH BRAND BLVD., SUITE 1010
GLENDALE, CA 91203-1243



01032008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
95-4822212

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WHITMIRE, ROBERT L
3918 ALHAMBRA DRIVE WEST
JACKSONVILLE, FL 32207

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

000000791461

01/23/08-80076-019 138.75

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	FREEBERG, DONALD
STREET ADDRESS	801 N. BRAND BLVD., #1010
CITY-ST-ZIP	GLENDALE, CA 91203
TITLE	MEM
NAME	FREEBERG, DANIEL
STREET ADDRESS	801 NORTH BRAND BLVD., SUITE 1010
CITY-ST-ZIP	GLENDALE, CA 912031243
TITLE	MEM
NAME	SIERRA LAND GROUP, INC.
STREET ADDRESS	801 NORTH BRAND BLVD., SUITE 1010
CITY-ST-ZIP	GLENDALE, CA 912031243
TITLE	MEM
NAME	SIERRA-ORLANDO, INC.
STREET ADDRESS	801 NORTH BRAND BLVD., SUITE 1010
CITY-ST-ZIP	GLENDALE, CA 912031243
TITLE	MEM
NAME	SIERRA-SANTA CLARA, INC.
STREET ADDRESS	801 NORTH BRAND BLVD., SUITE 1010
CITY-ST-ZIP	GLENDALE, CA 912031243
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

Shirley Hough

1/10/08

(818) 247-3681

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #