## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 30, 2002 8:00 am Secretary of State

DOCUMENT # 20100002080			04-30-2002 90007 047 ****55.00	
PLATINUM LAN	D CONCÉP	rs, L.L.C.		
DO NOT WRITE	IN THIS SI	PACE		
2. Principal Place of Business  800 ARMSTRONG BLUN 800 ARMST Suite, Apt. #, etc.  3. Mailing Address 800 ARMSTRONG BLUN 800 ARMST Suite, Apt. #, etc.		RONG BLUD	DO NOT WRITE IN THIS SPACE	
City & State KISSIMNEE FLORISH	City & State KISSIMMÉE	FLORIDA	4. FEI Number 59-3698109	Applied For Not Applicable
Zip Country 34741 USA	34741	Country USA		\$5.00 Additional Fee Required
		Name FRA		
DO NOT W IN THIS SE		Street Address	(P.O. Box Number is Not Acceptable)  EMPEROR DRIVE	
		City	MMEE FL	Zip Code 34744
8. The above named entity submits this statement for	or the purpose of changing it	s registered office or registe	ered agent, or both, in the State of Florida.	
SIGNATURE Signature, typical or printed name of registered agent	and title if applicable.		DAIL	
	Make Check P	FEE IS \$50.00 ayable to Department DUE BY MAY 1	of State	-
9. MANAGING MEMBERS/MANAGERS				
TITLE CO-TRUSTEE  NAME DENISE A FUSCO STREET ADDRESS BLOO EMPÉROR DRIVE		TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		
CHY-SI-21P KISSIMMEE FL 31744  TITLE CO-TRUSTEE  NAME  FRANK J. FUSCO  STREET ADDRESS  2240 EMPEROR DRIVE		TITLE NAME		
SIRETADDRESS 2260 EMPEROR DREVE CITY-ST-ZIP KESSIMMEE FL 34744		STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS		NAME STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		The state of the s
TITLE NAME. STREET ADDRESS		NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPA	CE:
CITY-ST-ZIP TITCE NAME SIREET ADDRESS		TITLE NAME STREET ADDRESS		
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS		TITLE  NAME  STREET ADDRESS		
CITY-ST-ZIP  11. I hereby certify that the information supplied will indicated on this report is true and accurate an limited liability company of the receiver or trust.	th this filing does not qualify d that my signature shall hav ee empowered to expcute th	for the exemption stated in ve the same legal effect as it is report as required by Cha	and First- Carriers	ertify that the information oer or manager of the