

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004243

FILED
Apr 20, 2009
Secretary of State

Entity Name: LITTLE BELL HOSPITALITY MARKETING LLC

Current Principal Place of Business:

440 CRYSTAL SPRINGS COURT
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

440 CRYSTAL SPRINGS COURT
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 61-1403646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, SHELLEY
440 CRYSTAL SPRINGS COURT
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

BELL, SHELLEY S
440 CRYSTAL SPRINGS COURT
ORANGE CITY, FL 32763 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: SHELLEY BELL

04/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BELL, SHELLEY
Address: 440 CRYSTAL SPRINGS CT
City-St-Zip: ORANGE CITY, FL 32763

Title: MGRM () Delete
Name: BELL, NICHOLAS
Address: 440 CRYSTAL SPRINGS CT
City-St-Zip: ORANGE CITY, FL 32763

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BELL, SHELLEY S
Address: 440 CRYSTAL SPRINGS CT
City-St-Zip: ORANGE CITY, FL 32763

Title: MGRM (X) Change () Addition
Name: BELL, NICHOLAS M
Address: 440 CRYSTAL SPRINGS CT
City-St-Zip: ORANGE CITY, FL 32763

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: SHELLEY BELL

MGRM

04/20/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date