


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L02000009531</b> 1. Entity Name ICON HOTEL AND RESTAURANT MANAGEMENT, LLC	
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03312005 No Chg-LLC CR2E083 (10/03)

Principal Place of Business 4401 VINELAND RD SUITE A-16 ORLANDO, FL 32811	Mailing Address 4401 VINELAND RD SUITE A-16 ORLANDO, FL 32811
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**DO NOT WRITE IN THIS SPACE**

4. FEI Number 16-1675781	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  MILLER, SOUTH & MILHAUSEN, P.A. C/O J. TODD SOUTH, ESQ. 2699 LEE ROAD, SUITE 120 WINTER PARK, FL 32789	<b>DO NOT WRITE IN THIS SPACE</b>
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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) DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR WILSON, CHARLES 2833 BUTLER BAY DRIVE NORTH WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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04/29/05-80131-013 50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:**

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

Date

Daytime Phone #

4.27.05 407 829-2001 x208