

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 16, 2003 8:00 am
Secretary of State

05-05-2003 90088 042 ****50.00

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DOCUMENT # L02000020861

1. Entity Name

L & L RESORT SERVICES, LLC



Principal Place of Business

**300 SOUTH ORANGE AVENUE, STE. 1000
ORLANDO FL 32801**

Mailing Address

**300 SOUTH ORANGE AVENUE, STE. 1000
ORLANDO FL 32801**

2. Principal Place of Business

8012 MONIER WAY

Suite, Apt. #, etc.

3. Mailing Address

8012 MONIER WAY

Suite, Apt. #, etc.

City & State

ORLANDO FL

City & State

ORLANDO FL

4. FEI Number

37-1439045

Applied For

Not Applicable

Zip

32835

Country

ORANGE

Zip

32835

Country

ORANGE

5. Certificate of Status Desired

☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

JONES, BRIAN M ESO

**300 SOUTH ORANGE AVENUE, STE. 1000
ORLANDO FL 32801**

7. Name and Address of New Registered Agent

ALTON H LYLES

Street Address (P.O. Box Number is Not Acceptable)

8012 MONIER WAY

City

ORLANDO

FL

Zip Code

32835

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]

Signature, typed or printed name of registered agent and its applicable.

(NOTE: Registered Agent signature required when reinstating)

4/29/03

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE NAME ☐ Delete
MANAGING MEMBER
HSM FINANCIAL, INC.
STREET ADDRESS
8012 MONIER WAY
CITY-ST-ZIP
ORLANDO, FL 32835

TITLE NAME ☐ Delete
MEMBER
CRAFTMASTER, INC.
STREET ADDRESS
1495 CROOKED PINE DR
CITY-ST-ZIP
MYRTLE BEACH, S.C. 29575

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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]

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

4/29/03 407-298-476

Date

Daytime Phone #

CR2E083 (10/02)

attachment

55051412

#L02000020861

July 14, 2003

Division of Corporations
Annual Reports Section

Subject: L & L Resort Services, LLC

Reference Number L02000020861

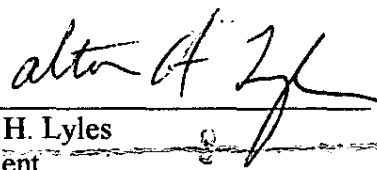
The following are the members of this LLC:

Managing Member

Alton H. Lyles
President
HSMM Financial, Inc.
8012 Monier Way
Orlando, FL 32835

Member

Blaine Liljenquist
President
Craftmaster, Inc.
1495 Crooked Pine Drive
Myrtle Beach, SC 29575

By: 

Alton H. Lyles

President

HSMM Financial, Inc