

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000017293

**FILED**  
**May 06, 2010**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA SUITES, LLC

**Current Principal Place of Business:**

1202 AVENIDA CENTRAL NORTH  
LADY LAKE, FL 32159 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O E. HOLLANDER, CPA  
5600 W MAPLE RD #C309  
WEST BLOOMFIELD, MI 48322 US

**New Mailing Address:**

**FEI Number:** 55-0831696

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DUCAT, DARRELL  
1205 AVENIDA CENTRAL NORTH  
LADY LAKE, FL 32159 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** DUCAT, DARRELL  
**Address:** 1205 AVENIDA CENTRAL NORTH  
**City-St-Zip:** LADY LAKE, FL 32159

**Title:** MGR  
**Name:** DUCAT, LARRY  
**Address:** 5030 JACKMAN  
**City-St-Zip:** TOLEDO, OH 43613

I hereby 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:** DARRELL DUCAT

MGR

05/06/2010

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