


# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 05, 2004 8:00 am**  
**Secretary of State**

05-05-2004 90001 004 \*\*\*\*50.00

<b>DOCUMENT # L03000043470</b>					
<b>1. Entity Name</b> SOUTHERN COMFORT R.V. RESORT, LLC					
<b>Principal Place of Business</b> 7725 N.W. 146TH STREET MIAMI LAKES, FL 33016 US			<b>Mailing Address</b> 7725 N.W. 146TH STREET MIAMI LAKES, FL 33016 US		
<b>2. Principal Place of Business</b> 345 EAST PALM DRIVE Suite, Apt. #, etc.		<b>3. Mailing Address</b> 7725 N.W. 146TH ST Suite, Apt. #, etc.			
<b>City &amp; State</b> FLORIDA CITY, FL Zip 33034 Country U.S.A.		<b>City &amp; State</b> MIAMI LAKES Zip FL Country U.S.A.		<b>4. FEI Number</b> 20-0404252	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>				<b>Applied For</b> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b> BRODIE, SIDNEY Z 7270 N.W. 12TH STREET MIAMI, FL 33026			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
<b>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.</b>					
<b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2004</b>			<b>Make check payable to Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	MGR RODRIGUEZ, ROLANDO 7725 N.W. 146TH STREET MIAMI LAKES, FL 33016 <input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	MGR, PRES RODRIGUEZ, ROLANDO 7725 N.W. 146TH ST MIAMI LAKES, FL 33016 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	MGRM DOLPHIN AMUSEMENT ENTERPRISES, LLC 7725 N.W. 146TH STREET MIAMI LAKES, FL 33016 <input checked="" type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	VP RODRIGUEZ, JORGE 7725 N.W. 146TH ST MIAMI LAKES, FL 33016 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
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<b>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.</b>					
<b>SIGNATURE:</b> _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					
Date				Daytime Phone #	