2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State
05-03-2004 90137 039 ****50.00

DOCUMENT # L03000043786

1. Entity Name
GLOBAL RESORT MARKETING, LLC

Principal Place of Business	Mailing Address
347 HAWAII WOODS ORLANDO, FL 32824	347 HAWAII WOODS ORLANDO, FL 32824

04292004 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
416 Becky ST	416 Becky ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO FL	City & State: ORLANDO FL
Zip: 32824 Country	Zip: 32824 Country

4. FEI Number 20-0377896 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HEAD, DWIGHT
347 HAWAII WOODS
ORLANDO, FL 32824

7. Name and Address of New Registered Agent

Name: BRADLEY ROGERS
Street Address (P.O. Box Number is Not Acceptable): 416 BECKY ST.
City: ORLANDO FL Zip Code: 32824

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] BRADLEY ROGERS 4/28/04
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, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HEAD, DWIGHT 347 HAWAII WOODS ORLANDO, FL 32824	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROGERS, BRADLEY 416 BECKY STREET ORLANDO, FL 32824	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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] BRADLEY ROGERS 4/28/04 407-509-0614
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #