

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051188

Entity Name: LAST RESORT 835, LLC

FILED
Feb 07, 2005
Secretary of State

Current Principal Place of Business:

759 SOUTH FEDERAL HIGHWAY, SUITE 303
STUART, FL 34994

New Principal Place of Business:

PO BOX 880369
STEAMBOAT SPRINGS, CO 80488

Current Mailing Address:

759 SOUTH FEDERAL HIGHWAY, SUITE 303
STUART, FL 34994

New Mailing Address:

PO BOX 880369
STEAMBOAT SPRINGS, CO 80488

FEI Number: 81-0642351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUTLAND, LEONARD JR., ESQ
759 SOUTH FEDERAL HIGHWAY, SUITE 303
STUART, FL 34994 US

Name and Address of New Registered Agent:

WILSON, GARY M
PO BOX 880369
STEAMBOAT SPRINGS, FL 80488 US

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: GARY M. WILSON

02/07/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: WILSON, GARY M PRES
Address: PO BOX 880369
City-St-Zip: STEAMBOAT, CO 80488

Title: MGR () Delete
Name: WILSON, SUSAN M V. PRES
Address: PO BOX 880369
City-St-Zip: STEAMBOAT, CO 80488

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GARY M. WILSON

PRES

02/07/2005

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