

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Jun 13, 2005 8:00 am
Secretary of State

04-26-2005 90014 018 ****50.00

DOCUMENT # L04000004269					
1. Entity Name TROVILLION WP31 LLC					
Principal Place of Business 1901 WOODWARD ST. ORLANDO, FL 32803 US			Mailing Address 1901 WOODWARD ST. ORLANDO, FL 32803 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
5. Name and Address of Current Registered Agent F & L CORP. ONE INDEPENDENT DRIVE SUITE 1300 JACKSONVILLE, FL 32202			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ FL Zip Code _____		
4. FEI Number 20-0624651 ☒ Applied For ☐ Not Applicable					
6. Certificate of Status Desired ☐ \$5.00 Additional Fee Required					
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, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when re-nesting) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005				Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM TROVILLION, DOUGLAS P 1901 WOODWARD ST. ORLANDO, FL 32803 ☐ 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	
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)(l), 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: _____			4/15/2005 (407) 895-9200		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

Amended

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

5/5/2005-90022-034-\$150.00-\$150.00

DOCUMENT # L04000010461					
1. Entity Name TRANS WORLD FLORIDA, LLC					
Principal Place of Business 38 CORPORATE CIR ALBANY, NY 12203			Mailing Address 38 CORPORATE CIR ALBANY, NY 12203		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		04222005 Chg-LLC CR2E083 (10/03)	
4. FEI Number 04-8784636				☐ Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	
7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____				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 _____ (NOTE: Registered Agent signature required when re-registering) _____ DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition	
_____ _____ _____ _____	☐ Delete		IT's Member Record Town Inc. 38 Corporate Circle Albany, NY 12203	☐ Change ☒ Addition	
_____ _____ _____ _____	☐ Delete		President Robert J. Higgins 6 Sage Estate Mendons, NY 12204	☐ Change ☒ Addition	
_____ _____ _____ _____	☐ Delete		Exec. VP - Real Estate Bruce J. Eisenberg 20 Hollingsbrook Drive Saratoga, NY 12866	☐ Change ☒ Addition	
_____ _____ _____ _____	☐ Delete		Exec VP John J Sullivan 14 Westford Rd Delmar NY 12054	☐ Change ☒ Addition	
_____ _____ _____ _____	☐ Delete		David Biese V.P. Finance 33 SW. 4th Ave. Coral Gables, FL 33134	☐ Change ☒ Addition	
_____ _____ _____ _____	☐ Delete		_____ _____ _____ _____	☐ 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: _____			4/27/05 (58) 152-1242		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					

Originally filed

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ANNUAL REPORT**

5/5/2005-90022-034-\$150.00-\$150.00

DOCUMENT # L04000010461					
1. Entity Name TRANS WORLD FLORIDA, LLC					
Principal Place of Business 38 CORPORATE CIR ALBANY, NY 12203			Mailing Address 38 CORPORATE CIR ALBANY, NY 12203		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	04222005 Chg-LLC CR2E083 (10/03)	
4. FEI Number 04-3784636				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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.					
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition	
			IT's Member Record Town Inc. 38 Corporate Circle Albany, NY 12203		
			Manager Robert Higgins 38 Corporate Circle Albany NY 12203		
			Manager Bruce J. C. Higgins 38 Corporate Circle Albany NY 12203		
			Manager John Sullivan 38 Corporate Circle Albany NY 12203		
			Manager David Biese 38 Corporate Circle Albany, NY 12203		
				☐ Change ☐ Addition	
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SIGNATURE: <u> </u>			Date: <u>5/29/05</u> Daytime Phone #: <u>(518) 152-1242</u>		

ATTACHMENT

30009245

ATTACHMENT

#L04 000004269

30009215

**RECORD TOWN, INC.
CORPORATE OFFICERS**

Member of Trans World Florida, LLC

<u>Name</u>	<u>Address</u>	<u>Home Address</u>	<u>Title</u>
Robert J. Higgins	38 Corporate Circle Albany, NY 12203	6 Sage Estate Menands, NY 12204	Chairman of the Board President & CEO
Bruce J. Eisenberg	38 Corporate Circle Albany, NY 12203	20 Rollingbrook Drive Saratoga, NY 12866	Exec. VP -Real Estate
John J. Sullivan	38 Corporate Circle Albany, NY 12203	14 Wexford Rd. Delmar, NY 12054	Executive Vice President CFO - Secretary
David Biese	38 Corporate Circle Albany, NY 12203	33 Swift Rd. Voorheesville, NY 12186	VP - Finance Treasurer