

# **2010 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L04000007581

**FILED**  
**Oct 28, 2010**  
**Secretary of State**

**Entity Name:** TROPICANA RESORT MOTELS, L.L.C.

**Current Principal Place of Business:**

300 HAMDEN DR  
CLEARWATER BEACH, FL 33767

**New Principal Place of Business:**

**Current Mailing Address:**

300 HAMDEN DR  
CLEARWATER BEACH, FL 33767

**New Mailing Address:**

**FEI Number:** 34-1978256

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIGIOVANNI, AGOSTINO  
163 BAYSIDE DRIVE  
CLEARWATER, FL 33767 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: TROPICANA RESORT MANAGEMENT, LLC.  
Address: 300 HAMDEN DRIVE  
City-St-Zip: CLEARWATER BEACH, FL 33767

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: TROPICANA RESORT MANAGEMENT, LLC

MGR

10/28/2010

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