

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000012031

**FILED**  
**Jan 20, 2010**  
**Secretary of State**

**Entity Name:** PARK MODEL CITY & RV SALES, LLC

**Current Principal Place of Business:**

14380 N CLEVELAND AVE  
NORTH FORT MYERS, FL 33903 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3516  
NORTH FORT MYERS, FL 33918

**New Mailing Address:**

**FEI Number:** 61-1484026

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHELPS, LYNDA  
17021 UPRIVER DRIVE  
NORTH FORT MYERS, FL 33917 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:** MGRM  
**Name:** PHELPS, LYNDA  
**Address:** 17021 UPRIVER DRIVE  
**City-St-Zip:** NORTH FORT MYERS, FL 33917 US

**Title:** MGRM  
**Name:** BURK, BRIAN  
**Address:** 14380 N CLEVELAND AVE  
**City-St-Zip:** NORTH FORT MYERS, FL 33903 US

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:** LYNDA PHELPS

MGRM

01/20/2010

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