

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000014262

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** KEINER CENTURY RESORTER, LLC

**Current Principal Place of Business:**

301 E. PINE STREET  
SUITE 1400  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

**Current Mailing Address:**

301 E. PINE STREET  
SUITE 1400  
ORLANDO, FL 32801 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

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

KEINER, JEFFREY D  
301 E. PINE STREET  
SUITE 1400  
ORLANDO, FL 32801 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: KEINER, JEFFREY D  
Address: 301 E. PINE STREET, SUITE 1400  
City-St-Zip: ORLANDO, FL 32801 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: JEFFREY D KEINER MGRM 01/05/2011

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