

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044100

Entity Name: MILROSE HOTEL, LLC

FILED
Aug 17, 2009
Secretary of State

Current Principal Place of Business:

500 COCOA BEACH CAUSEWAY
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

500 COCOA BEACH CAUSEWAY
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 11-3753345 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MILLIKEN, LLOYD
500 WEST COCOA CAUSEWAY
COCOA BEACH, FL 32931 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MILLIKEN, LLOYD
Address: 500 WEST COCOA BEACH CAUSEWAY
City-St-Zip: COCOA BEACH, FL 32931 US

Title: P () Delete
Name: MILLIKEN, LLOYD
Address: 500 WEST COCOA BEACH CAUSEWAY
City-St-Zip: COCOA BEACH, FL 32931 US

Title: V () Delete
Name: ROSE, DELMAS
Address: 5641 TASH LANE
City-St-Zip: COCOA, FL 32926

Title: S () Delete
Name: BRENNAN, RHODA S
Address: 1850 HARBOR POINT
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES:

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

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

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 exemption stated in Chapter 119, 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: RHODA BRENNAN

S

08/17/2009

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