

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000048290

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** REYES ROYALE RESORTS, LLC

**Current Principal Place of Business:**

28 WILDFERN DRIVE  
YOUNGSTOWN, OH 44505

**New Principal Place of Business:**

**Current Mailing Address:**

28 WILDFERN DRIVE  
YOUNGSTOWN, OH 44505

**New Mailing Address:**

**FEI Number:** 43-2082296

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MITCHELL, EDNA  
830 CASLER AVENUE  
CLEARWATER, FL 322233235 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 ( ) Delete  
Name: DEWEY, STEVEN  
Address: 1763 HEAVEN'S PEAK  
City-St-Zip: SAN ANTONIO, TX 78258

Title: MGRM ( ) Delete  
Name: REYES, CAMELITA  
Address: 28 WILDFERN DRIVE  
City-St-Zip: YOUNGSTOWN, OH 44505

Title: MGRM ( ) Delete  
Name: BARTLEY, FRELON  
Address: 44907 GLENGARRY RD  
City-St-Zip: CANTON, MI 48188

**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:

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:** FRELON BARTLEY

MGRM

04/29/2008

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