

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000048290

FILED
Jul 27, 2009
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 ()**
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:

MITCHELL, EDNA
830 CASLER AVENUE
CLEARWATER, FL 322233235 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: 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: CARMELITA REYES

MM

07/27/2009

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