

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068751

Entity Name: BINION RESERVE, LLC

FILED  
Mar 31, 2009  
Secretary of State

**Current Principal Place of Business:**

132 W PLANT ST  
STE 200  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 770609  
WINTER GARDEN, FL 34777

**New Mailing Address:**

FEI Number: 20-3293078

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PRATT, JAMES R ESQUIRE  
369 N. NEW YORK AVENUE, 3RD FLOOR  
WINTER PARK, FL 32789 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: MGR ( ) Delete  
Name: JUNE, ROHLAND A II  
Address: PO BOX 770609  
City-St-Zip: WINTER GARDEN, FL 34777

Title: MGR ( ) Delete  
Name: HOLSTON, ROBERT W JR.  
Address: PO BOX 770609  
City-St-Zip: WINTER GARDEN, FL 34777

Title: MGRM ( ) Delete  
Name: SEDLOFF, JEFFREY A  
Address: PO BOX 770609  
City-St-Zip: WINTER GARDEN, FL 34777

Title: MGRM ( ) Delete  
Name: KAMINSKI, CHRISTOPHER L  
Address: PO BOX 770609  
City-St-Zip: WINTER GARDEN, FL 34777

Title: MGRM (X) Delete  
Name: MAY, JACQUELINE M  
Address: PO BOX 770609  
City-St-Zip: WINTER GARDEN, FL 34777

**ADDITIONS/CHANGES:**

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

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

Title: MGRM (X) Change ( ) Addition  
Name: JUNE, JAMIE L  
Address: PO BOX 770609  
City-St-Zip: WINTER GARDEN, FL 34777

Title: MGRM (X) Change ( ) Addition  
Name: HOLSTON, BRANDI C  
Address: PO BOX 770609  
City-St-Zip: WINTER GARDEN, FL 34777

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: ROHLAND A JUNE

MGRM

03/31/2009

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