

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000025519

FILED
Apr 21, 2009
Secretary of State

Entity Name: TOP DOG RESORTS, LLC

Current Principal Place of Business:

1923 JOHN HENRY JONES BLVD
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

1923 JOHN HENRY JONES BLVD
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 20-8590412

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMALLEY & COMPANY, P.L.
1517 E HILLCREST STREET
ORLANDO, FL 32803 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: PAPARELLA, ANNMARIE
Address: 3503 SOMERSET CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: MGRM () Delete
Name: PAPARELLA, RALPH JR.
Address: 3503 SOMERSET CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: MGRM () Delete
Name: NASELLO, FRANCINE
Address: 3540 SOMERSET CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: MGRM () Delete
Name: NASELLO, EDWARD
Address: 3540 SOMERSET CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: MGRM () Delete
Name: HORDERN, DEBORAH
Address: 1462 THE HIDEOUT
City-St-Zip: LAKE ARIEL, PA 18436

Title: MGRM () Delete
Name: HORDERN, ROBERT
Address: 1462 THE HIDEOUT
City-St-Zip: LAKE ARIEL, PA 18436

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
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City-St-Zip:

Title: () Change () Addition
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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: EDWARD R. NASELLO

MGRM

04/21/2009

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