

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000033499

FILED
Apr 16, 2009
Secretary of State

Entity Name: LAMPE CANYONS RESORT, LLC

Current Principal Place of Business:

18 WINCHESTER ROAD
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

18 WINCHESTER ROAD
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 59-3748317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLICK, JAMES J
3203 SOUTH CONWAY ROAD
SUITE 106
ORLANDO, FL 32812 US

Name and Address of New Registered Agent:

FLICK, JAMES J
3700 SOUTH CONWAY ROAD
SUITE 100
ORLANDO, FL 32812 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:

04/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LAMPE, BRUCE A
Address: 18 WINCHESTER ROAD
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGR () Delete
Name: LAMPE, CHERYL A
Address: 18 WINCHESTER ROAD
City-St-Zip: ORMOND BEACH, FL 32174 US

ADDITIONS/CHANGES:

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: JAMES J. FLICK

MR.

04/16/2009

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