2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# L07000078473

Entity Name: PARADISE PALMS RESORT CLUB, LLC.

Current Principal Place of Business:

8950 PARADISE PALMS BLVD.
KISSIMMEE, FL 34747

New Principal Place of Business:

Current Mailing Address:

8950 PARADISE PALMS BLVD.
KISSIMMEE, FL 34747

New Mailing Address:

FEI Number: 26-0814685 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LA ROSA, ANDREW
801 OAK SHADOWS RD.
CELEBRATION, FL 34747 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:	LA ROSA, ANDREW	
Address:	801 OAK SHADOWS RD.	
City-St-Zip:	CELEBRATION, FL 34747	
Title:	MGR	( ) Delete
Name:	LA ROSA, JOE	
Address:	1021 BANLES ROSE ST.	
City-St-Zip:	CELEBRATION, FL 34747	
Title:	MGR	( ) Delete
Name:	ROGERS, JOE	
Address:	2970 LAKE DRIVE	
City-St-Zip:	KISSIMMEE, FL 34747	
Title:	MGR	( ) Delete
Name:	ABATE, RONALD	
Address:	1418 STICKLEY AVENUE	
City-St-Zip:	CELEBRATION, FL 34747	
Title:	MGR	( ) Delete
Name:	LA ROSA, MICHAEL	
Address:	1002 SANDLACE COURT	
City-St-Zip:	CELEBRATION, FL 34747	

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
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: ANDREW LA ROSA MGR 04/17/2009

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