

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000082233

Entity Name: HILLTOPS CABIN LLC

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

21400 HARBORSIDE BLVD.  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

21400 HARBORSIDE BLVD.  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

FEI Number: 26-0651093

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LANDSBERG, MICHAEL W  
21400 HARBORSIDE BLVD.  
PORT CHARLOTTE, FL 33952 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  
Name: LANDSBERG, MICHAEL W  
Address: 21400 HARBORSIDE BLVD.  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGRM  
Name: LANDSBERG, JAMIE L  
Address: 21400 HARBORSIDE BLVD.  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGRM  
Name: ROOT, R. CHANDLER IV  
Address: 1623 CURTIS AVENUE  
City-St-Zip: MANHATTAN BEACH, CA 90266

Title: MGRM  
Name: ROOT, DENISE L  
Address: 1623 CURTIS AVENUE  
City-St-Zip: MANHATTAN BEACH, CA 90266

I hereby 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: MICHAEL LANDSBERG

MGRM

02/16/2011

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