

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 14, 2008 8:00 am
Secretary of State

03-13-2008 90268 007 ***138.75

DOCUMENT # L07000128186			
1. Entity Name HIDDEN VALLEY CAMPING RESORT, LLC			
Principal Place of Business 2992 BROOKFIELD LANE CLEARWATER, FL 33761		Mailing Address 2992 BROOKFIELD LANE CLEARWATER, FL 33761	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 26-1539418		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MCATEE, HERBERT C 2992 BROOKFIELD LANE CLEARWATER, FL 33761		7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)			
DATE _____		DATE _____	
FILE NOW!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Herbert McAttee 2992 Brookfield Lane Clearwater FL 33761 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President/Treasurer George Robbins 20251 Emerald Ave Port Charlotte FL 33952 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u><i>Herbert C McAttee</i></u>		3/10/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING BUSINESS MEMBER, MEMBER, OR AUTHORIZED REPRESENTATIVE		Daytime Phone #	