

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000011531

**FILED**  
**Mar 19, 2009**  
**Secretary of State**

**Entity Name:** RESORT CONNECTION USA, LLC

**Current Principal Place of Business:**

200 GRAND BLVD., SUITE 205-B  
DESTIN, FL 32550

**New Principal Place of Business:**

**Current Mailing Address:**

200 GRAND BLVD., SUITE 205-B  
DESTIN, FL 32550

**New Mailing Address:**

**FEI Number:** 26-1878669

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KAMM, ROBERT T  
200 GRAND BLVD., SUITE 205-B  
DESTIN, FL 32550 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: OLIN PROPERTIES, LLC,  
Address: 200 GRAND BLVD. SUITE 205-B  
City-St-Zip: DESTIN, FL 32550

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:** ROBERT T KAMM

VP

03/19/2009

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