

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000095847

FILED  
Apr 12, 2010  
Secretary of State

**Entity Name:** VACATION INN RESORT REALTY OF THE PALM BEACHES, LLC

**Current Principal Place of Business:**

6500 N. MILITARY TRAIL  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

6500 N. MILITARY TRAIL  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

POTERE, ROBERT  
6500 NORTH MILITARY TRAIL #533  
#533  
WEST PALM BEACH, FL 33407 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: MGR  
Name: POTERE, ROBERT  
Address: 6500 N. MILITARY TRAIL #533  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: MGR  
Name: PAGNEULO, PAUL  
Address: 6500 N. MILITARY TRAIL  
City-St-Zip: WEST PALM BEACH #563, FL 33407

Title: MGR  
Name: VAN NORMAN, PAMELA  
Address: 6500 N. MILITARY TRAIL #445  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: MGR  
Name: LUCKE, MARION I  
Address: 6500 N. MILITARY TRAIL #069  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: MGR  
Name: SHUFF, CHARLES  
Address: 6500 N. MILITARY TRAIL  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: PRES  
Name: FALLON, JAMES L  
Address: 711 HUMMINGBIRD WAY #102  
City-St-Zip: NORTH PALM BEACH, FL 33408

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: ROBERT POTERE

MGR

04/12/2010

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