

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000107116

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Entity Name:** FLAME RECREATIONAL PROPERTIES, LLC

**Current Principal Place of Business:**

1645 W, MAIN STREET  
INVERNESS, FL 34450

**New Principal Place of Business:**

**Current Mailing Address:**

8990 E. SWEETWATER DRIVE  
INVERNESS, FL 34450

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

BILENKY, WILLIAM S  
8990 E. SWEETWATER DRIVE  
INVERNESS, FL 34450 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: MORTON, JAMES W  
Address: 1645 W. MAIN STREET  
City-St-Zip: INVERNESS, FL 34450

Title: MGRM  
Name: BILENKY, OLIVIA J  
Address: 8990 E. SWEETWATER DRIVE  
City-St-Zip: INVERNESS, FL 34450

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: OLIVIA BILENKY

MGRM

01/12/2011

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