

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000054381

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** RESORTS PLUS INTERNATIONAL, LLC

**Current Principal Place of Business:**

8815 CONROY-WINDERMERE RD., STE 109  
ORLANDO, FL 32835

**New Principal Place of Business:**

**Current Mailing Address:**

8815 CONROY-WINDERMERE RD., STE 109  
ORLANDO, FL 32835

**New Mailing Address:**

**FEI Number:** 27-2618682

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THE ENTREPRENEUR LAW CENTER, P.L.  
250 NORTH ORANGE AVENUE  
SUITE 1200  
ORLANDO, FL 32801 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:** BROWN, DEBORAH  
**Address:** 5036 DR. PHILLIPS BLVD, #256  
**City-St-Zip:** ORLANDO, FL 32819

**Title:** MGRM  
**Name:** BRITT, STANLEY  
**Address:** 5036 DR. PHILLIPS BLVD, #256  
**City-St-Zip:** ORLANDO, FL 32819

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:** DEBORAH BROWN

MGRM

03/21/2012

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