

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000072972

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** SUITE DREAMS ORLANDO, LLC

**Current Principal Place of Business:**

429 S. KELLER ROAD, SUITE 300  
ORLANDO, FL 32810

**New Principal Place of Business:**

**Current Mailing Address:**

429 S. KELLER ROAD, SUITE 300  
ORLANDO, FL 32810

**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:**

ALLEN, W. RILEY  
429 S. KELLER ROAD, SUITE 300  
ORLANDO, FL 32810    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: BOLDING, RON  
Address: 570 HAVERTY COURT  
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGR  
Name: BOLDING, BRENDA  
Address: 570 HAVERTY CT  
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGR  
Name: ALLEN, RILEY  
Address: 429 S. KELLER ROAD, SUITE 300  
City-St-Zip: ORLANDO, FL 32810

Title: MGR  
Name: ALLEN, MARY F  
Address: 429 S. KELLER ROAD, SUITE 300  
City-St-Zip: ORLANDO, FL 32810

Title: MGR  
Name: BIBLIOWICZ, MIKE DR  
Address: 5830 LAKE UNDERHILL RD.  
City-St-Zip: ORLANDO, FL 328074311

Title: MGR  
Name: RABAJA, DAVID DR  
Address: 5830 LAKE UNDERHILL RD.  
City-St-Zip: ORLANDO, FL 328074311

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: MARY F. ALLEN

MGR

02/17/2011

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