


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Feb 04, 2004 08:00 AM  
Secretary of State**

|   |   |
|---|---|
| <b>DOCUMENT # L98000002266</b><br>1. Entity Name<br><b>GRAND LAKE RV RESORT, L.L.C.</b> |  |
|---|---|

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|--|--|
| Principal Place of Business<br><b>2922 CARDINAL DRIVE<br/>VERO BEACH, FL 32963</b> | Mailing Address<br><b>2922 CARDINAL DRIVE<br/>VERO BEACH, FL 32963</b> |
|--|--|

**DO NOT WRITE IN THIS SPACE**



01262004 No Chg-LLC

CR2E083 (10/03)

|   |                                       |
|---|---------------------------------------|
| 4. FCI Number<br><b>65-0871555</b>                        | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$5.00</b> Additional Fee Required |

|   |                                       |
|---|---------------------------------------|
| 6. Name and Address of Current Registered Agent<br><br><b>SCHAUB, RICHARD G JR<br/>2922 CARDINAL DRIVE<br/>VERO BEACH, FL 32963</b> | <b>DO NOT WRITE<br/>IN THIS SPACE</b> |
|---|---------------------------------------|

8. 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. I am familiar with, and accept the obligations of registered agent

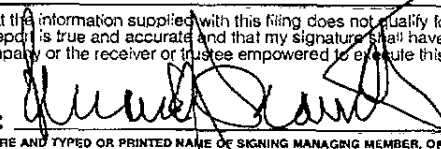
SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2004**

| 9. MANAGING MEMBERS/MANAGERS                       |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | MGRM<br>SCHAUB, RICHARD G JR.<br>2922 CARDINAL DRIVE<br>VERO BEACH, FL 32963 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |

UG00000035507  
02/06/04-80022-001 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**  **2/3/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date