

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001695

Entity Name: CNL RESORT HOLDINGS GP, LLC

FILED  
Apr 23, 2008  
Secretary of State

## Current Principal Place of Business:

420 S. ORANGE AVENUE  
STE 700  
ORLANDO, FL 32801

## Current Mailing Address:

PO BOX 2226  
ORLANDO, FL 32802

## New Principal Place of Business:

1 POST OFFICE SQUARE  
STE 3100  
BOSTON, MA 02109

## New Mailing Address:

1 POST OFFICE SQUARE  
STE 3100  
BOSTON, MA 02109

FEI Number: 20-0972073

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMAS, STEPHANIE J  
420 S. ORANGE AVENUE  
STE 700  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

WRIGHT, DANIEL  
1 POST OFFICE SQUARE  
STE 3100  
BOSTON, FL 02196 US

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: DANIEL WRIGHT

04/23/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BLOOM, BARRY A.N.  
Address: 420 S. ORANGE AVENUE, STE 700  
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete  
Name: GRISWOLD, JOHN A  
Address: 420 S. ORANGE AVENUE, STE 700  
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete  
Name: STRICKLAND, C. BRIAN  
Address: 420 S. ORANGE AVENUE, STE 700  
City-St-Zip: ORLANDO, FL 32801

## ADDITIONS/CHANGES:

Title: VP (X) Change ( ) Addition  
Name: DANIEL, WRIGHT  
Address: 1 POST OFFICE SQUARE STE 3100  
City-St-Zip: BOSTON, MA 02109

Title: VP (X) Change ( ) Addition  
Name: BUZA, JOHN  
Address: 1 POST OFFICE SQUARE STE 3100  
City-St-Zip: BOSTON, MA 02109

Title: VP (X) Change ( ) Addition  
Name: FOSTER, MICHAEL E  
Address: 1 POST OFFICE SQUARE STE 3100  
City-St-Zip: BOSTON, MA 02109

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DANIEL WRIGHT

VP

04/23/2008

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