

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003127

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: SANDESTIN ENTERTAINMENT, LLC

**Current Principal Place of Business:**

9300 EMERALD COAST PARKWAY WEST  
DESTIN, FL 32550

**New Principal Place of Business:**

**Current Mailing Address:**

9300 EMERALD COAST PARKWAY WEST  
DESTIN, FL 32550

**New Mailing Address:**

221 CORPORATE CIRCLE, SUITE Q  
ATTN: CORP. LEGAL DEPT.  
GOLDEN, CO 80401 US

FEI Number: 20-1477170

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 ( ) Delete  
Name: STANGE, WALTER M  
Address: 9300 EMERALD COAST PARKWAY WEST  
City-St-Zip: DESTIN, FL 32550

Title: MGRM (X) Delete  
Name: BABCOCK, ROBERT  
Address: 9300 EMERALD COAST PARKWAY WEST  
City-St-Zip: DESTIN, FL 32550

Title: MGRM (X) Delete  
Name: SPEICHER, MICHAEL  
Address: 301 E. PINE STREET, SUITE 400  
City-St-Zip: ORLANDO, FL 32801

Title: MGRM (X) Delete  
Name: SMYTHE, HUGH R  
Address: 4545 BLACKCOMB WAY PARKWAY WEST  
City-St-Zip: WHISTLER, B.C., CANADA, XX

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: INTRAWEST SANDESTIN, COMPANY, L.L.C.  
Address: 301 E. PINE STREET, SUITE 400  
City-St-Zip: ORLANDO, FL 32801

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DAVID BLAIKLOCK

MGRM

04/21/2008

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