2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 29, 2007
Secretary of State

DOCUMENT# M04000003246

Entity Name: CNL RESORT SUB SENIOR MEZZ GP, LLC

Current Principal Place of Business:

420 S. ORANGE AVENUE
STE 700
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

PO BOX 2226
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 27-0099966 **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:

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	( ) Delete
Name:	VEIDT, DENISE M	
Address:	445 BROAD HOLLOW RD	
City-St-Zip:	MELVILLE, NY 11747	
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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: STEPHANIE J. THOMAS AS 03/29/2007

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