

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006321

FILED  
Mar 20, 2012  
Secretary of State

Entity Name: CNL INCOME BURNSIDE MARINA, LLC

**Current Principal Place of Business:**

450 S. ORANGE AVE.  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4920  
ORLANDO, FL 32802

**New Mailing Address:**

FEI Number: 20-5884004

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCARCELLI, LINDA A  
450 S. ORANGE AVE.  
ORLANDO, FL 32801 US

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

PATTERSON, AMY J  
450 S. ORANGE AVE.  
ORLANDO, FL 32801 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: AMY J. PATTERSON

03/20/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: JOHNSON, JOSEPH T  
Address: 450 S. ORANGE AVE.  
City-St-Zip: ORLANDO, FL 32801

Title: MGR  
Name: YESTER, SHARON A  
Address: 450 S. ORANGE AVE.  
City-St-Zip: ORLANDO, FL 32801

Title: MGR  
Name: GREER, HOLLY  
Address: 450 S. ORANGE AVE.  
City-St-Zip: ORLANDO, FL 32801

Title: MGR  
Name: ANGELO, BERNARD J  
Address: 68 SO. SERVICE ROAD, SUITE 120  
City-St-Zip: MELVILLE, NY 11747

Title: MGR  
Name: WONG, TONY  
Address: 68 SO. SERVICE ROAD, SUITE 120  
City-St-Zip: MELVILLE, NY 11747

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: JOSEPH T. JOHNSON

MGR

03/20/2012

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