2008 LIMITED LIABILITY COMPANY

ANNUAL REPORT



02-27-2008 90074 047 ***143 75 DOCUMENT # M06000006472 OLCC FLORIDA, LLC Principal Place of Business Mailing Address 60010804 8505 WEST IRLO BRONSON MEMORIAL HIGHWAY 8505 WEST IRLO BRONSON MEMORIAL HIGHWAY KISSIMMEE, FL 34747 KISSIMMEE, FL 34747 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01142008 Cho-LLC CR2E083 (12/06) City & State Applied For City & State 4. FEI Number 20-5919578 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 2731 EXECUTIVE PARK DRIVE, STE. 4 WESTON, FL 33331 City Zip Code 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 Signature, typed or printed name of registered agent and tide if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 Make check payable to After May 1, 2008 Fee will be \$538.75 Florida Department of State MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE TITI F ☐ Addition ☐ Delete Change NAME WILSON RESORT GROUP, LLC NAME 8505 WEST IRLO BRONSON MEMORIAL HIGHWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KISSIMMEE, FL 34747 CITY-ST-ZIP CEOP TITLE ☐ Delete TITLE ☐ Change Addition HARILL, DON L NAME NAME SEE ATTACHED FOR LIST OF OFFICERS 8505 WEST IRLO BRONSON MEMORIAL HWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KISSIMMEE, FL 34747 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition Exec. VP NAME LOWER, BRIAN T NAME Lower, Brian T. STREET ADDRESS 8505 WEST IRLO BRONSON MEMORIAL HWY STREET ADDRESS 8505 W. Irlo Bronson Memorial Hwy Kissimmee, FL 34747 CITY-ST-ZIP KISSIMMEE, FL 34747 CITY-ST-ZIP Change TITLE TITI F ☐ Addition ☐ Delete Exec. VP/CFO NAME NELSON, THOMAS R NAME Nelson, Thomas R. STREET ADDRESS 8505 WEST IRLO BRONSON MEMORIAL HWY STREET ADDRESS 8505 W. Irlo Bronson Memorial Hwy CITY-ST-ZIP KISSIMMEE, FL 34747 CITY-ST-ZIP TITI F Delete TITLE X Change ☐ Addition Sr. VP THOMPSON, MICHAEL NAME NAME Thompson, Michael 8505 WEST IRLO BRONSON MEMORIAL HWY STREET ADDRESS STREET ADORESS 8505 W. Irlo Bronson Memorial Hwy Kissimmee, FL 34747 KISSIMMEE, FL 34747 CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITLE X Change ☐ Addition Exec. VP ALBERTSON, BOB NAME NAME Albertson, Bob STREET ADDRESS 8505 WEST IRLO BRONSON MEMORIAL HWY STREET ADDRESS 8505 W. Irlo Bronson Memorial Hwy CITY-ST-ZIP KISSIMMEE, FL 34747 CITY-ST-ZIP Kissimmee, FL 34747

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this peport is true and accurate and trat 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.

Brian T. Lower SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 2/25/08

407-239-0000

FILED

Feb 27, 2008 8:00 am Secretary of State

Daytime Phone #

ATTACHMENT 600/0804 4 4 M D G D 000006472

OLCC FLORIDA, LLC (Panama City) (FEI # 20-5919578)

8505 West Irlo Bronson Memorial Hwy. Kissimmee, FL 34747

Don L. Harrill Brian T. Lower Thomas R. Nelson Michael Thompson Bob Albertson P/CEO
Exec. VP
Exec. VP/CFO
Sr. VP
Exec. VP