


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 APR 20 AM 11:38 <i>ymh</i> 4/24	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # M97000000677		1a. Principal Place of Business Address	
LAKE BUENA VISTA VILLAGE HOTEL L.L.C. 3140 W. BRITTON ROAD, SUITE A OKLAHOMA CITY OK 73120				3140 W. BRITTON ROAD, SUITE OKLAHOMA CITY OK 73120	
2. Principal Place of Business <i>12490 Apopka Vineland Rd</i> Suite, Apt. #, etc.		2a. Mailing Address <i>12490 Apopka Vineland Rd</i> Suite, Apt. #, etc.		3. Date Organized or Qualified 10/13/1997	
City & State <i>Orlando, FL</i>		City & State <i>Orlando, FL</i>		3a. State of Formation OK	
Zip <i>32830</i>		Zip <i>32830</i>		4. FEI Number <i>73-1528235</i> APPLIED FOR	
				5. Date of Last Report	
				6. Certificate of Status Desired SB 75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				Suite, Apt. #, etc.	
				City	
				Zip Code FL	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmation of the company.					
SIGNATURE _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	SLATER, ROBERT E JR.	3140 W. BRITTON ROAD, SUIT		OKLAHOMA CITY OK	
MGR	BOCK, J. LYNN	3140 W. BRITTON ROAD, SUIT		OKLAHOMA CITY OK	
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11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: *[Signature]*