

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

**FILED
Nov 05, 2007
Secretary of State**

DOCUMENT# L03000038568

Entity Name: PRISTINE PROPERTIES VACATION RENTALS LLC

Current Principal Place of Business:

317 MONUMENT AVNUE
PORT ST. JOE, FL 32456

New Principal Place of Business:

Current Mailing Address:

317 MONUMENT AVENUE
PORT ST. JOE, FL 32456

New Mailing Address:

FEI Number: 55-0849011 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RISH, GIBSON & SCHOLZ, P.A.
206 EAST FOURTH STREET
PORT ST. JOE, FL 32456 US

Name and Address of New Registered Agent:

GERLACH, JUSTIN D
317 MONUMENT AVENUE
PORT ST. JOE, FL 32456 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: JUSTIN D. GERLACH 11/05/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GERLACH, JUSTIN D
Address: 110 HERITAGE LANE
City-St-Zip: PORT ST.. JOE, FL 32456

Title: MGR () Delete
Name: COX, CATHERINE S
Address: 2387 CONSTITUTION DRIVE
City-St-Zip: PORT ST. JOE, FL 32456

Title: MGR () Delete
Name: COX, JAMES A
Address: 402 REID AVENUE
City-St-Zip: PORT ST. JOE, FL 32456

Title: MGR () Delete
Name: GERLACH, ALYSON M
Address: 110 HERITAGE LANE
City-St-Zip: PORT ST. JOE, FL 32456

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 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: JUSTIN D. GERLACH MGMR 11/05/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date