

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000123157

FILED
Jan 11, 2009
Secretary of State

Entity Name: MS VACATION GROUP, LLC

Current Principal Place of Business:

24629 OAK ISLAND DRIVE
PASS CHRISTIAN, MS 37571

New Principal Place of Business:

24629 OAK ISLAND DRIVE
PASS CHRISTIAN, MS 39571

Current Mailing Address:

24629 OAK ISLAND DRIVE
PASS CHRISTIAN, MS 37571

New Mailing Address:

24629 OAK ISLAND
PASS CHRISTIAN, MS 39571

FEI Number: 20-8121139

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLEAT, DAVID B ESQ.
4477 LEGENDARY DRIVE
SUITE 202
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

BILLHIMER, TERRI B ESQ.
24629 OAK ISLAND
SUITE 202
PASS CHRISTIAN, FL 39571 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: TERRI BILLHIMER

01/11/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BILLHIMER, TERRI L
Address: 24629 OAK ISLAND
City-St-Zip: PASS CHRISTIAN, MS 37571

Title: MGRM () Delete
Name: LUCAS, JON
Address: 850 BAYVIEW AVE.
City-St-Zip: BILOXI, MS 37531

Title: MGR () Delete
Name: BILLHIMER, JOSEPH
Address: 24629 OAK ISLAND DR
City-St-Zip: PASS CHRISTIAN, MS 39571

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BILLHIMER, TERRI L
Address: 24629 OAK ISLAND
City-St-Zip: PASS CHRISTIAN, MS 39571

Title: MGRM (X) Change () Addition
Name: LUCAS, JON
Address: 850 BAYVIEW AVE.
City-St-Zip: BILOXI, MS 39571

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: TERRI BILLHIMER

MGRM

01/11/2009

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