


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90271 047 ***138.75

DOCUMENT # L07000089079			
1. Entity Name AD VANTAGE VIRTUAL TOURS, LLC			
Principal Place of Business 3109 CANOE COURT ST JOHNS, FL 32259		Mailing Address 3109 CANOE COURT ST JOHNS, FL 32259	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 2220 CRALOW	
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 108 Box 152	
City & State		City & State St Johns FL	
Zip	Country	Zip	Country
32259	US	32259	US



02132008 Chg-LLC CR2E083 (12/06)

4. FEI Number
261828402

Applied For
Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
HILL, DEBRA ESQ 8834 GOODBY'S EXECUTIVE DRIVE JACKSONVILLE, FL 32217		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EDMONDS, PATRICIA 3109 CANOE COURT ST JOHNS, FL 32259 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 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.

Pat Edman

3/25/08