

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000002750

Entity Name: LUXURY VACATION RENTALS, L.L.C.

FILED
Jan 11, 2005
Secretary of State

Current Principal Place of Business:

19907 FRONT BEACH ROAD
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

135 QUEENS CIRCLE
PANAMA CITY, FL 32405

Current Mailing Address:

19907 FRONT BEACH ROAD
PANAMA CITY BEACH, FL 32413

New Mailing Address:

PO BOX 7145
PANAMA CITY BEACH, FL 32413

FEI Number: 45-0465258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORTON, TIMOTHY
135 QUEENS CIRCLE
PANAMA CITY, FL 32413 US

Name and Address of New Registered Agent:

HORTON, TIMOTHY
135 QUEENS CIRCLE
PANAMA CITY, FL 32405 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:

01/11/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MCCARTY, JUDITH A
Address: 19907 FRONT BEACH RD
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM () Delete
Name: MCCARTY, WOODIE S
Address: 19907 FRONT BEACH RD
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HORTON, CHRISTINE R
Address: 135 QUEENS CIRCLE
City-St-Zip: PANAMA CITY, FL 32405

Title: MGRM (X) Change () Addition
Name: HORTON, TIMOTHY G
Address: 135 QUEENS CIRCLE
City-St-Zip: PANAMA CITY, FL 32405

Title: MGRM () Change (X) Addition
Name: DONALDSON, SHARI
Address: PO BOX 191
City-St-Zip: COLDEN, NY 14033

Title: MGRM () Change (X) Addition
Name: DONALDSON, BRUCE
Address: PO BOX 191
City-St-Zip: COLDEN, NY 14033

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRISTINE R. HORTON

MGRM

01/11/2005

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