

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000002750

FILED
Apr 24, 2007
Secretary of State

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

Current Principal Place of Business:

135 QUEENS CIRCLE
PANAMA CITY, FL 32405

New Principal Place of Business:

1516 CAROLINA AVENUE
LYNN HAVEN, FL 32444

Current Mailing Address:

PO BOX 16344
PANAMA CITY, FL 32406

New Mailing Address:

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 32405 US

Name and Address of New Registered Agent:

HORTON, TIMOTHY
1516 CAROLINA AVENUE
LYNN HAVEN, FL 32444 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: _____

04/24/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

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

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HORTON, CHRISTINE R
Address: 1516 CAROLINA AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: MGRM (X) Change () Addition
Name: HORTON, TIMOTHY G
Address: 1516 CAROLINA AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

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 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: CHRISTINE HORTON

MGRM

04/24/2007

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