

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021712

Entity Name: SMART VACATIONS, L.C.

FILED
Apr 19, 2005
Secretary of State

Current Principal Place of Business:

ATTN: PAUL M. CALDWELL
25 TOWN CENTER BLVD., SUITE
CLERMONT, FL 34711

Current Mailing Address:

ATTN: PAUL M. CALDWELL, ATTORNEY
P.O. BOX 120069
CLERMONT, FL 34712

New Principal Place of Business:

ATTN: PAUL M. CALDWELL
25 TOWN CENTER BLVD, SUITE C
CLERMONT, FL 34714

New Mailing Address:

ATTN: PAUL M. CALDWELL, ATTORNEY
P.O. BOX 120069
CLERMONT, FL 347120069

FEI Number: 36-4506236

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDWELL, PAUL M
25 TOWN CENTER BLVD., SUITE
CLERMONT, FL 34712 US

Name and Address of New Registered Agent:

CALDWELL, PAUL M
25 TOWN CENTER BOULEVARD
SUITE C
CLERMONT, FL 34714 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: PAUL M. CALDWELL

04/19/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: PLUMLEY, G. JOYCE
Address: 11736 OSPREY POINTE BLVD
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES:

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 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: G. JOYCE PLUMLEY

MGR

04/19/2005

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