

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000010655

FILED
Jun 29, 2005
Secretary of State

Entity Name: GLOBAL DESTINATIONS DEVELOPMENT, LLC

Current Principal Place of Business:

888 BRICKELL KEY DRIVE
SUITE 706
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

888 BRICKELL KEY DRIVE
SUITE 706
MIAMI, FL 33131

New Mailing Address:

FEI Number: 04-3751392 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HARDING, ROBERT L ESQ.
20 NORTH EOLA DRIVE
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

GREVE, MICHAEL R
888 BRICKELL KEY DRIVE
SUITE 706
MIAMI, FL 33131 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: MICHAEL R. GREVE

06/29/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GREVE, MICHAEL R
Address: 888 BRICKELL KEY DRIVE, STE 706
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: DARLEY, HUGH JR
Address: 505 PEACHTREE RD
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES:

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 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: MICHAEL R. GREVE

MGR

06/29/2005

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