

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012054

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: ORLANDO VACATION REALTY, LLC

**Current Principal Place of Business:**

101 POLO PARK BLVD.  
STE. 1  
DAVENPORT, FL 33897

**New Principal Place of Business:**

**Current Mailing Address:**

13826 HAWK LAKE DRIVE  
ORLANDO, FL 32837

**New Mailing Address:**

FEI Number: 91-2191998

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FLAWAND, DANNY  
13826 HAWK LAKE DR.  
ORLANDO, FL 32837 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: G ( ) Delete  
Name: FLAMAND, DANNY  
Address: 13826 HAWK LAKE DR.  
City-St-Zip: ORLANDO, FL 32837

Title: G ( ) Delete  
Name: FLAMAND, AN  
Address: 13826 HAWK LAKE DR.  
City-St-Zip: ORLANDO, FL 32837

Title: G ( ) Delete  
Name: HOWLETT, PETE  
Address: 6209 TALARIA DR  
City-St-Zip: WINDERMERE, FL 34786

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: PETE HOWLETT

G

04/22/2009

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