

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040442

**FILED**  
**Apr 11, 2007**  
**Secretary of State**

**Entity Name:** COMPASS VACATION RENTALS, L.L.C.

**Current Principal Place of Business:**

5901 SUN BLVD., SUITE 105  
ST. PETERSBURG, FL 33715

**New Principal Place of Business:**

**Current Mailing Address:**

111 SECOND AV. NE  
SUITE 1001  
SAINT PETERSBURG, FL 33701 US

**New Mailing Address:**

5901 SUN BLVD., SUITE 105  
SAINT PETERSBURG, FL 33715 US

FEI Number: 45-0525755

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SUTTER, HEATHER M  
111 SECOND AV NE  
SUITE 1001  
SAINT PETERSBURG, FL 33701 US

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

SUTTER, HEATHER M  
5901 SUN BLVD., SUITE 105  
SAINT PETERSBURG, FL 33715 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: HEATHER M SUTTER

04/11/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: THE SUTTER GROUP, L., L.C.  
Address: 111 SECOND AV NE SUITE 1001  
City-St-Zip: SAINT PETERSBURG, FL 33701

**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 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: HEATHER M SUTTER

MGRM

04/11/2007

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