2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000059181

Name:

Address:

City-St-Zip:

SIMPSON, DIANNE

HAMPSHIRE, PO1 2TF, U.K., XX

1 CHATHAM DRIVE, PEMBROKE PARK, PORTSMOUTH

Entity Name: ORLANDO PROPERTIES UK, LLC

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3263 SOUTH JOHN YOUNG PARKWAY KISSIMMEE, FL 34746 **Current Mailing Address: New Mailing Address:** 3263 SOUTH JOHN YOUNG PARKWAY 1 CHATHAM DRIVE PEMBROK PARK, PORTSMOUTH, HAMPSHIRE KISSIMMEE, FL 34746 UNITED KINGDOM PO1 2TF, FEI Number: 20-1544750 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KERNEY, THOMAS F 1420 E. CONCORD STREET ORLANDO, FL 32803 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SIMPSON, MARTIN Name: Name: 1 CHATHAM DRIVE, PEMBROKE PARK, PORTSMOUTH Address: Address: City-St-Zip: HAMPSHIRE, PO1 2TF, U.K., XX City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: SIMPSON, JOHN Name: Address: 1 CHATHAM DRIVE, PEMBROKE PARK, PORTSMOUTH Address: City-St-Zip: HAMPSHIRE, PO1 2TF, U.K., XX City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SIMPSON, PAULA Name: Name: 1 CHATHAM DRIVE, PEMBROKE PARK, PORTSMOUTH Address: Address: City-St-Zip: HAMPSHIRE, PO1 2TF, U.K., XX City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: THOMAS F KERNEY AGT 04/27/2007