

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061207

FILED
Apr 24, 2008
Secretary of State

Entity Name: REVOLUTION THE OFF ROAD EXPERIENCE LLC

Current Principal Place of Business:

4000 SR 33
CLERMONT, FL 34711 US

New Principal Place of Business:

4000 SR 33
CLERMONT, FL 34714 US

Current Mailing Address:

P.O. BOX 136322
CLERMONT, FL 34713 US

New Mailing Address:

FEI Number: 83-0489206 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JOWETT, KEVIN H
17120 CYPRESSWOOD WAY
CLERMONT, FL 34714 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: MGR () Delete
Name: JOWETT, KEVIN H
Address: 17120 CYPRESSWOOD WAY
City-St-Zip: CLERMONT, FL 34714

Title: MGR () Delete
Name: JOWETT, AUDREY J
Address: 17120 CYPRESSWOOD WAY
City-St-Zip: CLERMONT, FL 34714

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 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: KEVIN H JOWETT

MR

04/24/2008

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