

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000012004

FILED
Apr 07, 2007
Secretary of State

Entity Name: SUNSET VACATION HOMES, LLC

Current Principal Place of Business:

1036 JEATER BEND DRIVE
CELEBRATION, FL 34747 US

New Principal Place of Business:

5287 WEST IRLO BRONSON MEM HWY
KISSIMMEE, FL 34746 US

Current Mailing Address:

1036 JEATER BEND DRIVE
CELEBRATION, FL 34747 US

New Mailing Address:

5287 WEST IRLO BRONSON MEM HWY
KISSIMMEE, FL 34746 US

FEI Number: 03-0557046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A H GANTT CPA & ASSOCIATES PA
3359 W VINE ST
104
KISSIMMEE, FL 34741 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: MGRM () Delete
Name: YOUNG, DANIEL
Address: 1036 JEATER BEND DRIVE
City-St-Zip: CELEBRATION, FL 34747 US

Title: MGR () Delete
Name: YOUNG, SEAN
Address: 1036 JEATER BEND DRIVE
City-St-Zip: CELEBRATION, FL 34747 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: YOUNG, DANIEL
Address: 789 OAK SHADOWS ROAD
City-St-Zip: CELEBRATION, FL 34747 US

Title: MGR (X) Change () Addition
Name: YOUNG, SEAN
Address: 789 OAK SHADOWS ROAD
City-St-Zip: CELEBRATION, FL 34747 US

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: DANIEL YOUNG

PRES

04/07/2007

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