

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000017761

FILED
Apr 20, 2006
Secretary of State

Entity Name: IDEAL VACATION HOMES, LLC

Current Principal Place of Business:

130 OAK CHASE PLACE
DAVENPORT, FL 33896

New Principal Place of Business:

809 PADDOCK WAY
CASSELBERRY, FL 32707

Current Mailing Address:

130 OAK CHASE PLACE
DAVENPORT, FL 33896

New Mailing Address:

809 PADDOCK WAY
CASSELBERRY, FL 32707

FEI Number: 20-2376585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAVENAR, BRIAN
130 OAK CHASE PLACE
DAVENPORT, FL 33896 US

Name and Address of New Registered Agent:

CAVENAR, BRIAN
809 PADDOCK WAY
CASSELBERRY, FL 32707 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: BRIAN K CAVENAR

04/20/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CAVENAR, BRIAN K
Address: 130 OAK CHASE PLACE
City-St-Zip: DAVENPORT, FL 33896

Title: MGRM () Delete
Name: CAVENAR, LISA M
Address: 130 OAK CHASE PLACE
City-St-Zip: DAVENPORT, FL 33896

Title: MGRM (X) Delete
Name: ORTIZ, PRINCESS
Address: 130 OAK CHASE PLACE
City-St-Zip: DAVENPORT, FL 33896

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CAVENAR, BRIAN K
Address: 809 PADDOCK WAY
City-St-Zip: CASSELBERRY, FL 32707

Title: MGRM (X) Change () Addition
Name: CAVENAR, LISA M
Address: 809 PADDOCK WAY
City-St-Zip: CASSELBERRY, FL 32707

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: BRIAN K CAVENAR

MGR

04/20/2006

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