

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025617

FILED
Feb 26, 2007
Secretary of State

Entity Name: RESORT ONLINE INSTITUTE, L.L.C.

Current Principal Place of Business:

6000 METROWEST BOULEVARD
SUITE 200
ORLANDO, FL 32835 US

New Principal Place of Business:

Current Mailing Address:

6000 METROWEST BOULEVARD
SUITE 200
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEFKOWITZ, IVAN M
430 NORTH MILLS AVENUE
ORLANDO, FL 32803 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: SHERDEL, JOHN R
Address: 7550 HINSON STREET 3C
City-St-Zip: ORLANDO, FL 32819 US

Title: MGR () Delete
Name: MCGRATH, JOHN
Address: 1543 WESCOTT LOOP
City-St-Zip: WINTER SPRINGS, FL 32709 US

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 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: JOHN SHERDEL MGR 02/26/2007

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