2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# L05000054374

Entity Name: CELEBRATION OFFICE CONDOS, LLC

Current Principal Place of Business:

800 CELEBRATION AVE STE 223
CELEBRATION, FL 34747 US

New Principal Place of Business:

1420 CELEBRATION BLVD
100
CELEBRATION, FL 34747 US

Current Mailing Address:

800 CELEBRATION AVE STE 223
CELEBRATION, FL 34747 US

New Mailing Address:

1420 CELEBRATION BLVD
100
CELEBRATION, FL 34747 US

FEI Number: 20-2942104 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LA ROSA, ANDREW OWNER
801 OAK SHADOWS ROAD
CELEBRATION, FL 34747 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: LA ROSA, ANDREW OWNER
Address: 801 OAK SHADOWS ROAD
City-St-Zip: CELEBRATION, FL 34747 US

Title: MGR ( ) Delete
Name: LA ROSA, ANDREW OWNER
Address: 801 OAK SHADOWS ROAD
City-St-Zip: CELEBRATION, FL 34747 US

Title: MGR ( ) Delete
Name: LA ROSA, MICHAEL OWNER
Address: 801 OAK SHADOWS ROAD
City-St-Zip: CELEBRATION, FL 34747 US

Title: MGR ( ) Delete
Name: LA ROSA, JOSEPH OWNER
Address: 1021 BANKS ROSE STREET
City-St-Zip: CELEBRATION, FL 34747 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: MELISSINOS, DEANA OWNER
Address: 1420 CELEBRATION BLVD SUITE 100
City-St-Zip: CELEBRATION, FL 34747 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: LA ROSA, JOSEPH OWNER
Address: 1420 CELEBRATION BLVD SUITE 100
City-St-Zip: CELEBRATION, FL 34747 US

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: JOSEPH LA ROSA MGR 04/29/2008

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