2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 16, 2009
Secretary of State

DOCUMENT# L05000107099

Entity Name: ORLANDO RENTAL HOME SERVICES, LLC

Current Principal Place of Business:

9114 WEST HIGHWAY 192
CLERMONT, FL 34714

New Principal Place of Business:

3201 LINDFIELDS BLVD
KISSIMMEE, FL 34747

Current Mailing Address:

9114 WEST HIGHWAY 192
CLERMONT, FL 34714

New Mailing Address:

3201 LINDFIELDS BLVD
KISSIMMEE, FL 34747

FEI Number: 20-3744932 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, SOUTH, MILHAUSEN & CARR, P.A.
C/O JEFFREY P. MILHAUSEN, ESQ.
2699 LEE ROAD, SUITE 120
WINTER PARK, FL 32789 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: GRACE, DAN
Address: 9114 WEST HIGHWAY 192
City-St-Zip: CLERMONT, FL 34714

Title: MGR ( ) Delete
Name: WATSON, TERENCE
Address: 9114 WEST HIGHWAY 192
City-St-Zip: CLERMONT, FL 34714

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: GRACE, DAN
Address: 3201 LINDFIELDS BLVD
City-St-Zip: KISSIMMMEE, FL 34747

Title: MGR (X) Change ( ) Addition
Name: WATSON, TERENCE
Address: 3201 LINDFIELDS BLVD
City-St-Zip: KISSIMMMEE, FL 34747

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: TERRY WATSON MGR 03/16/2009

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