



**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 29, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000113435 1. Entity Name PRINCESS HOLDINGS, LLC	
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Principal Place of Business 27 NORTH SUMMERLIN AVENUE ORLANDO, FL 32801 US	Mailing Address 27 NORTH SUMMERLIN AVENUE ORLANDO, FL 32801 US
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DO NOT WRITE IN THIS SPACE



04152008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-3970767	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**STONE, STEPHEN M
725 NORTH MAGNOLIA AVENUE
ORLANDO, FL 32803**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75


05/22/08-80060-001 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RIA LUTHRA TRUST DATED MAY 3, 2001 27 NORTH SUMMERLIN AVENUE ORLANDO, FL 32801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BECHTOLD, JILL 221 ROMANO AVENUE CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **4-18-08 407-649-9888**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #