


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 10, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000051873

1. Entity Name
 BVHG-VP, LLC



Principal Place of Business 10100 INTERNATIONAL DRIVE SUITE 2001 ORLANDO, FL 32821	Mailing Address 10100 INTERNATIONAL DRIVE SUITE 2001 ORLANDO, FL 32821
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DO NOT WRITE IN THIS SPACE



01252008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5044497	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

FROST, MICHAEL H
 10100 INTERNATIONAL DRIVE
 SUITE 2001
 ORLANDO, FL 32821

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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

03/28/08-80095-009 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BUENA VISTA HOSPITALITY GROUP, INC. 10100 INTERNATIONAL DRIVE #2001 ORLANDO, FL 32821
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FROST, MICHAEL H 10100 INTERNATIONAL DRIVE #2001 ORLANDO, FL 32821
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STOLZ, ROBERT 10100 INTERNATIONAL DRIVE #2001 ORLANDO, FL 32821
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HEINTZ, DONALD P 10100 INTERNATIONAL DRIVE #2001 ORLANDO, FL 32821
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JENKINS, DONNA K 10100 INTERNATIONAL DRIVE #2001 ORLANDO, FL 32821
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MOREL, FLORIAN 10100 INTERNATIONAL DRIVE #2001 ORLANDO, FL 32821

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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: *[Signature]* **2/28/08** **407-352-7161**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #