

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000092300

FILED
Jul 10, 2007
Secretary of State

Entity Name: UNIVERSAL CARE VACATION LLC

Current Principal Place of Business:

2612 HIDDEN LAKE DR N.
UNIT B
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 52404
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 20-5573411 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BUENO, ERIKSON A SR.
2612 HIDDEN LAKE DR N.
UNIT B
SARASOTA, FL 34237 US

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: GONZALEZ, DIEGO SR.
Address: 1803 TARPON AVE
City-St-Zip: SARASOTA, FL 34234

Title: MGR () Delete
Name: RODRIGUEZ, JUAN SR.
Address: 5385 NORTH SALFORD BLLVD
City-St-Zip: NORTH PORT, FL 34286

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 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: ERIKSON A. BUENO

MGR

07/10/2007

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