


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000106150 1. Entity Name ALLEN'S GLOBAL TRAVEL, LLC	
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Principal Place of Business 2170 WEKIVA VILLAGE LANE APOPKA, FL 32703 US	Mailing Address 2170 WEKIVA VILLAGE LANE APOPKA, FL 32703 US
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DO NOT WRITE IN THIS SPACE



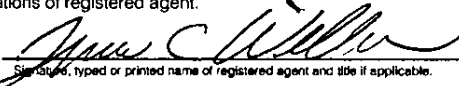
03312008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5807431	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent WILLIAMS, JAMES C 2170 WEKIVA VILLAGE LANE APOPKA, FL 32703

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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 	<u>James C. Williams</u>	<u>4/4/08</u>
<small>(NOTE: Registered Agent signature required when reinstating)</small>		

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	U00000938828 05/28/08-80003-009 138.75
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WILLIAMS, JAMES C 2170 WEKIVA VILLAGE LANE APOPKA, FL 32703
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WILLIAMS, CHERYL L 2170 WEKIVA VILLAGE LANE APOPKA, FL 32703
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WILLMAR, C ALLEN 3765 CHILTON DR SAGINAW, MI 32703
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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: 	<u>James C. Williams</u>	<u>4/4/08</u>	<u>407-574 5694</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date</small>	<small>Daytime Phone #</small>