

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000113417

FILED
Jan 04, 2008
Secretary of State

Entity Name: AGA VACATION HOME, LLC

Current Principal Place of Business:

1531 SE 36 AVENUE
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

1531 SE 36 AVENUE
OCALA, FL 34471

New Mailing Address:

FEI Number: 06-1829117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODING, WILLIAM J III
1531 SE 36 AVENUE
OCALA, FL 34471 US

Name and Address of New Registered Agent:

GOODING, W. JAMES III
1531 SE 36 AVENUE
OCALA, FL 34471 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: W. JAMES GOODING III

01/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GOODING, WILLIAM J III
Address: 1531 SE 36 AVENUE
City-St-Zip: OCALA, FL 34471

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GOODING, W. JAMES III
Address: 1531 SE 36 AVENUE
City-St-Zip: OCALA, FL 34471

Title: MGR () Change (X) Addition
Name: AUSLEY, KENNETH C
Address: 1521 SE 36TH AVENUE
City-St-Zip: OCALA, FL 34471

Title: MGR () Change (X) Addition
Name: AUSLEY, STEVEN J
Address: 1521 SE 36TH AVENUE
City-St-Zip: OCALA, FL 34471

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: W. JAMES GOODING III

MGR

01/04/2008

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