

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000090706

Entity Name: DRYSDALE TRAVEL LLC

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

13650 6TH COURT NORTH
LOXAHATCHEE, FL 33470

New Principal Place of Business:

70 MAHORIS DRIVE
ROYAL PALM BEACH, FL 33411

Current Mailing Address:

13650 6TH COURT NORTH
LOXAHATCHEE, FL 33470

New Mailing Address:

70 MAHORIS DRIVE
ROYAL PALM BEACH, FL 33411

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRYSDALE, NANCY C
13650 6TH COURT NORTH
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

POSNER, MICHAEL J
4420 BEACON CIRCLE
WEST PALM BEACH, FL 33407 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: MICHAEL J POSNER

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DRYSDALE, NANCY C
Address: 13650 6TH COURT NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

Title: MGR () Delete
Name: BERZE, MARTIN L
Address: 70 MAHORIS DRIVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RAO, STEPHEN T
Address: 70 MAHORIS DRIVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: MARTIN BERZE

MGR

04/29/2008

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