

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000111583

FILED
May 02, 2008
Secretary of State

Entity Name: SERENITY VACATIONS, L.L.C.

Current Principal Place of Business:

600 S. NORTHLAKE BOULEVARD
SUITE 200
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

600 S. NORTHLAKE BOULEVARD
SUITE 200
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 26-1498811 **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:

ZENODRO HOMES AT SERENITY, INC.
600 S. NORTHLAKE BOULEVARD
SUITE 200
ALTAMONTE SPRINGS, FL 32701 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:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: ZENODRO HOMES AT SER, ENITY, INC.
Address: 600 S. NORTHLAKE BOULEVARD, SUITE 200
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: RR TROPICAL INVESTME, NT GROUP, INC.
Address: 1564 DAYTONIA ROAD
City-St-Zip: MIAMI BEACH, FL 33141 US

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: SERENITY VACATIONS

MGRM

05/02/2008

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