

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000105446

FILED  
Mar 17, 2009  
Secretary of State

Entity Name: ORLANDO VACATIONS VILLAS LLC

## Current Principal Place of Business:

16605 SUNRISE LAKES BLVD  
SUITE 3  
CLERMONT, FL 34714

## New Principal Place of Business:

10504 ANGLER CT  
ORLANDO, FL 32825

## Current Mailing Address:

16605 SUNRISE LAKES BLVD  
SUITE 3  
CLERMONT, FL 34714

## New Mailing Address:

PO BOX 781941  
ORLANDO, FL 32878 19

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

INSTANT EQUITY LLC  
10504 ANGLER CT  
ORLANDO, FL 32825 US

## Name and Address of New Registered Agent:

PEGASUS GROUP INTERNATIONAL INC  
10504 ANGLER CT  
ORLANDO, FL 32825 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: NEIL PARKIN

03/17/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: INSTANT EQUITY LLC,  
Address: 10504 ANGLER CT  
City-St-Zip: ORLANDO, FL 32825

Title: MGR ( ) Delete  
Name: NEIL, PARKIN  
Address: 10504 ANGLER CT  
City-St-Zip: ORLANDO, FL 32825

Title: MGR ( ) Delete  
Name: GARY, AURELIUS  
Address: 28 BAY RIDGE LOOP  
City-St-Zip: MASCOTTE, FL 34714

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: JOHN BAILEY,  
Address: 10504 ANGLER CT  
City-St-Zip: ORLANDO, FL 32825

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: NEIL PARKIN

MGR

03/17/2009

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