

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000113844

FILED
May 22, 2009
Secretary of State

Entity Name: CRYSTAL PALM VILLA LLC

Current Principal Place of Business:

1038 ORANGE COSMOS BOULEVARD
DAVENPORT, FL 33837

New Principal Place of Business:

Current Mailing Address:

17 VALENTINE WAY
CHALFONT ST GILES, BUCKS, HP8 4JB UK

New Mailing Address:

17 VALENTINE WAY
CHALFONT ST GILES, BUCKS, FL HP8 4JB UK

FEI Number: 98-0595210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

DONAGHUE, TERRY
213 CARDINAL COURT
CHAMPIONS GATE, FL 33896 US

Name and Address of New Registered Agent:

DONAGHUE, TERRY MR
213 CARDINAL COURT
CHAMPIONS GATE, FL 33896 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: TERRY DONAGHUE

05/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEVART, JON
Address: 17 VALENTINE WAY
City-St-Zip: CHALFONT ST GILES, BUCKS, FL HP8 4JB UK

Title: MGRM () Delete
Name: HITCHCOCK, SUSAN
Address: 17 VALENTINE WAY
City-St-Zip: CHALFONT ST GILES, BUCKS, FL HP8 4JB UK

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEVART, JON P MR
Address: 17 VALENTINE WAY
City-St-Zip: CHALFONT ST GILES, BUCKS, FL HP8 4JB UK

Title: MGRM (X) Change () Addition
Name: HITCHCOCK, SUSAN A MS
Address: 17 VALENTINE WAY
City-St-Zip: CHALFONT ST GILES, BUCKS, FL HP8 4JB UK

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: JON LEVART

MGRM

05/22/2009

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