

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005612

Entity Name: ESSEN MARKETING, L.L.C.

FILED
Jan 30, 2006
Secretary of State

Current Principal Place of Business:

515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

12403 NACOGDOCHES
110
SAN ANTONIO, TX 78217 US

Current Mailing Address:

515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 65-0947444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: INTERVAL FINANCIAL S, ERVICES, L.C.
Address: 12403 NACOGDOCHES, #110
City-St-Zip: SAN ANTONIO, TX 78217

Title: MGR () Delete
Name: WRIGHT, DAVID
Address: 3363 WEST COMMERCIAL BOULEVARD #202
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES:

Title: MGR. (X) Change () Addition
Name: INTERVAL FINANCIAL S, ERVICES, L.C.
Address: 12403 NACOGDOCHES, #110
City-St-Zip: SAN ANTONIO, TX 78217

Title: MGR. (X) Change () Addition
Name: CARPENTER, NORMAN A MGR.
Address: 12403 NACOGDOCHES SUITE 110
City-St-Zip: SAN ANTONIO, TX 78217 US

I hereby certify that the information supplied with this filing does not qualify for the 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: NORMAN A. CARPENTER

MGR.

01/30/2006

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