

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90040 023 ****50.00

DOCUMENT # M03000001095

1. Entity Name
VACATION ESCAPES, LLC



Principal Place of Business
**238BEDFORDWAY
FRANKLIN, TN 37064**

Mailing Address
**238BEDFORDWAY
FRANKLIN, TN 37064**

60041478



2. Principal Place of Business - No P.O. Box #

104 Woodmont Blvd.

3. Mailing Address

104 Woodmont Blvd.

Suite, Apt. #, etc.

Suite 410

Suite, Apt. #, etc.

Suite 410

04232007 Chg-LLC CR2E083 (12/06)

City & State

Nashville TN

City & State

Nashville TN

4. FEI Number
06-1663230

Applied For
Not Applicable

Zip

37205

Country

USA

Zip

37205

Country

USA

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**KELLAR, LARRY D
5514 N. DAVIS HIGHWAY, SUITE 105
PENSACOLA, FL 32503**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
NAME **BANKEMPER, JOSEPH**
STREET ADDRESS **4175 TRINITY ROAD**
CITY-ST-ZIP **FRANKLIN, TN 37067**

TITLE **MGR** ☐ Delete
NAME **TEMPLE, DAVID W**
STREET ADDRESS **10 CAMEL BACK COURT**
CITY-ST-ZIP **BRENTWOOD, TN 37027**

TITLE **MGR** ☐ Delete
NAME **HILL, BRAD**
STREET ADDRESS **822 WOODBURN DRIVE**
CITY-ST-ZIP **BRENTWOOD, TN 37027**

TITLE **MGR** ☐ Delete
NAME **SUDKAMP, JAY**
STREET ADDRESS **4009 PALOMARE BLVD**
CITY-ST-ZIP **LEXINGTON, KY 40513**

TITLE **MGR** ☐ Delete
NAME **SLINKARD, PAUL**
STREET ADDRESS **8 ANGEL TRACE**
CITY-ST-ZIP **BRENTWOOD, TN 37027**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

David Temple

Date

Daytime Phone #

4/23/07