2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2007
Secretary of State

DOCUMENT# M06000007026

Entity Name: CNL RESORT JUNIOR MREP, LLC

Current Principal Place of Business:

420 S ORANGE AVE, STE 700
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

420 S ORANGE AVE, STE 700
ORLANDO, FL 32801

New Mailing Address:

PO BOX 2226
ORLANDO, FL 32802

FEI Number: 01-0879697 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMAS, STEPHANIE J
420 S ORANGE AVE, STE 700
ORLANDO, FL 32801 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: BLOOM, BARRY A
Address: 420 S ORANGE AVE, STE 700
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete
Name: GRISWOLD, JOHN A
Address: 420 S ORANGE AVE, STE 700
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete
Name: STRICKLAND, C BRIAN
Address: 420 S ORANGE AVE, STE 700
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete
Name: FREDLINGTON, JOHN L
Address: 445 BROAD HOLLOW RD, STE 239
City-St-Zip: MELVILLE, NY 11747

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: BLOOM, BARRY A.N
Address: 420 S ORANGE AVE, STE 700
City-St-Zip: ORLANDO, FL 32801

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

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 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: STEPHANIE J. THOMAS AS 03/28/2007

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