2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2008
Secretary of State

DOCUMENT# M07000000554

Entity Name: ULTIMATE NAPLES MONTEVERDE, LLC

Current Principal Place of Business:

3501 W VINE STREET, SUITE 225
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

3501 W VINE STREET, SUITE 225
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

CALLAGHAN, PHIL J
3501 W VINE STREET
225
KISSIMMEE, FL 34741 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: PHIL CALLAGHAN 01/08/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	CASTELROCK PARTNERS, LLC	
Address:	3501 W VINE STREET, SUITE 225	
City-St-Zip:	KISSIMMEE, FL 34741	
Title:	MGR	( ) Delete
Name:	ULTIMATE RESORT DEST, INATION CLUB M A NAGEMEN	
Address:	3501 W VINE STREET, SUITE 225	
City-St-Zip:	KISSIMMEE, FL 34741	
Title:	MGR	( ) Delete
Name:	CALLAGHAN, PHIL	
Address:	3501 W VINE STREET, SUITE 225	
City-St-Zip:	KISSIMMEE, FL 34741	
Title:	MGR	( ) Delete
Name:	TOUSIGNANT, JIM	
Address:	3501 W VINE STREET, SUITE 225	
City-St-Zip:	KISSIMMEE, FL 34741	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: PHIL CALLAGHAN CFO 01/08/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date