



**2008 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P97000061322			
1. Entity Name B.L. VACATION OWNERSHIP, INC.			
Principal Place of Business 7503 ATLANTIS WAY CELEBRATION, FL 34747 US		Mailing Address 3015 N OCEAN BLVD STE 125 FORT LAUDERDALE, FL 33308 US	
DO NOT WRITE IN THIS SPACE			
		01082008 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-0826972	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			
FOSTER, REBECCA A 3015 N. OCEAN BLVD. STE., 121 FORT LAUDERDALE, FL 33308		DO NOT WRITE IN THIS SPACE	
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: _____ <small>Signature, typed or printed name of registered agent and state if applicable (NOTE: Registered Agent signature required when renouncing) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE U00000897635 04/25/08-80056-019 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS LAMBERT, DANIEL 2419 E. COMMERCIAL BLVD., #100 FT LAUDERDALE, FL 33308		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT VERILLO, JAMES 2419 E. COMMERCIAL BLVD., #100 FT LAUDERDALE, FL 33308		
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12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		4.9.08	984.537.4765
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>