

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009115

Entity Name: ALMOND VACATIONS, LLC

FILED
Jan 19, 2012
Secretary of State

Current Principal Place of Business:

3315 MAGGIE BLVD.
SUITE 1000
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

3315 MAGGIE BLVD.
SUITE 1000
ORLANDO, FL 32811

New Mailing Address:

FEI Number: 42-1533529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEVINE GOODMAN RASCO & WELLS, P.A.
777 BRICKELL AVENUE, SUITE 850
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

DEVINE GOODMAN RASCO & WELLS, P.A.
777 BRICKELL AVENUE
SUITE 850
MIAMI, FL 33131 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: /S/ LAWRENCE D. GOODMAN

01/19/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: SLEE, CAROL L
Address: 4839 FIORAZANTE AVE.
City-St-Zip: ORLANDO, FL 32839

I hereby 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: /S/ CAROL L. SLEE

MGR

01/19/2012

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