

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000058606

**Entity Name:** AXEL VACATION HOME INC

**Current Principal Place of Business:**

266 CAPTIVA DR  
DAVENPORT, FL 33896

**Current Mailing Address:**

PO BOX 593285  
ORLANDO, FL 32859

**FEI Number: 84-2570013**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FAIL SAFE ACCOUNTING, LLC  
20 S ROSE AVE  
SUITE 4  
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:** FARAH CRUZ

04/30/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name DELL'OLIO, CHRISTIAN D  
Address 5259 IMAGES CIR APT 204  
City-State-Zip: KISSIMMEE FL 34746

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** DELL'OLIO , CHRISTIAN D

P

04/30/2021

Electronic Signature of Signing Officer/Director Detail

Date