# 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L05000053838

Entity Name: WELLINGTON VACATIONS, LLC

# **Current Principal Place of Business:**

1930 HARRISON STREET SUITE 209 HOLLYWOOD, FL 33020

# **Current Mailing Address:**

1930 HARRISON STREET SUITE 209 HOLLYWOOD, FL 33020 US

# FEI Number: 20-1932715

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

CITRINE MANAGEMENT SERVICES, INC. 1930 HARRISON STREET SUITE 209 HOLLYWOOD, FL 33020 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:

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title	MGR
Name	CITRINE MANAGEMENT SERVICES INC.
Address	1930 HARRISON STREET, SUITE 209
City-State-Zip:	HOLLYWOOD FL 33020

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 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; and that my name appears above, or on an attachment with all other like empowered.

S

SIGNATURE: ELKING

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

04/30/2013

Date

Date