

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000106478

**FILED**  
**Feb 26, 2014**  
**Secretary of State**  
**CC9384721221**

**Entity Name:** FLORIDA SCANDINAVIAN VACATION HOMES AND MANAGEMENT LLC

**Current Principal Place of Business:**

8701 W IRLO BRONSON MEMORIAL HWY  
SUITE 136  
KISSIMMEE, FL 34747

**Current Mailing Address:**

8701 W IRLO BRONSON MEMORIAL HWY  
SUITE 136  
KISSIMMEE, FL 34747

**FEI Number:** 27-1254572

**Certificate of Status Desired:** No

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

DALEN, JANNE E  
8959 MAJESTY PALM RD  
SUITE 136  
KISSIMMEE, FL 34747 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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name DALEN, JANNE E  
Address 8959 MAJESTY PALM RD  
City-State-Zip: KISSIMMEE FL 34747

Title MGRM  
Name ROGERS, JOSEPH B  
Address 2970 LAKE DRIVE  
City-State-Zip: KISSIMMEE FL 34747

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

**SIGNATURE:** DALEN , JANNE E

**MGR**

**02/26/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date