

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000091239

**Entity Name:** TRAVEL VACATION AUTHORITY LLC

**Current Principal Place of Business:**

523 PARK DRIVE  
KEY WEST, FL 33040

**Current Mailing Address:**

523 PARK DRIVE  
KEY WEST, FL 33040

**FEI Number:** 45-2800607

**Certificate of Status Desired:** No

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

UNDERWOOD, TERRENCE J  
523 PARK DRIVE  
KEY WEST, FL 33040 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	Title	MGRM
Name	UNDERWOOD, TERRENCE J	Name	UNDERWOOD, SANDRA
Address	523 PARK DRIVE	Address	523 PARK DRIVE
City-State-Zip:	KEY WEST FL 33040	City-State-Zip:	KEY WEST FL 33040
Title	MGRM		
Name	USTALOV, VITALY		
Address	3314 NORTHSIDE DRIVE		
City-State-Zip:	KEY WEST FL 33040		

*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:** SANDRA UNDERWOOD

**MGRM**

**04/25/2014**

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

\_\_\_\_\_  
Date