

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000075477

Entity Name: FORT LAUDERDALE VACATION HOUSES, LLC**Current Principal Place of Business:**3333 NE 16TH PLACE
FT. LAUDERDALE, FL 33305**Current Mailing Address:**535 N VICTORIA PARK ROAD
FORT LAUDERDALE, FL 33301 US**FEI Number:** 47-3744911**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WALDBUESER, W D
3333 NE 16TH PLACE
FT. LAUDERDALE, FL 33305 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:** WILLIAM D WALDBUESER

02/19/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name WALDBUESER, WILLIAM D JR
Address 3333 NE 16TH PLACE
City-State-Zip: FT. LAUDERDALE FL 33305

Title MGR
Name WALDBUESER, WILLIAM D SR
Address 535 N VICTORIA PARK ROAD
City-State-Zip: FORT LAUDERDALE FL 33301

Title AMBR
Name OATES, JOHNNY O
Address 2300 CASTILLA ISLE
City-State-Zip: FT. LAUDERDALE FL 33301

Title AMBR
Name WALDBUESER, R L
Address 635 RIVIERA ISLE
City-State-Zip: FT. LAUDERDALE FL 33301

Title AUTHORIZED REPRESENTATIVE
Name CHANG, BRANDON YOUNG
Address 535 N VICTORIA PARK ROAD
City-State-Zip: FORT LAUDERDALE FL 33301

Title AUTHORIZED MEMBER
Name MUSIAL, DEREK
Address 700 NE 17 AVENUE
City-State-Zip: FT LAUDERDALE FL 33304

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: WILLIAM DOUGLAS WALDBUESER

MANAGER

02/19/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date