

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000112639

**Entity Name:** FITNESS VACATION EXCHANGE, LLC

**Current Principal Place of Business:**

28101 PASEO AZTECA  
SAN JUAN CAPISTRANO, FL 92675

**Current Mailing Address:**

28101 PASEO AZTECA  
SAN JUAN CAPISTRANO, FL 92675 US

**FEI Number: 81-4387161**

**Certificate of Status Desired: No**

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

UNITED STATES CORPORATION AGENTS, INC.  
5575 S. SEMORAN BLVD.  
SUITE 36  
ORLANDO,, FL 32822 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	AMBR	Title	AMBR
Name	LUCY, GIA	Name	FRANDRUP, MICHAELA
Address	28101 PASEO AZTECA	Address	28101 PASEO AZTECA
City-State-Zip:	SAN JUAN CAPISTRANO FL 92675	City-State-Zip:	SAN JUAN CAPISTRANO FL 92675

*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: MICHAELA FRANDRUP** \_\_\_\_\_

**AMBR**

**04/29/2021**

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date