

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000004916

Entity Name: A FAMILY ON VACATION, LLC

Current Principal Place of Business:

719 WALTHAM AVENUE
ORLANDO, FL 32809

Current Mailing Address:

7512 DR. PHILLIPS BLVD
STE. 50-960
ORLANDO, FL 32819 US

FEI Number: 82-4207741

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RUSE, MADELINE D
10701 BOCA POINTE DR
ORLANDO, FL 32836 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 RUSE, MADELINE D
Address 10701 BOCA POINTE
City-State-Zip: ORLANDO FL 32836

Title AP
Name FUFA, ANDREEA R
Address 10701 BOCA POINTE DR
City-State-Zip: ORLANDO FL 32836

Title MGR
Name PATEL, DHARMESHKUMAR S
Address 10701 BOCA POINTE DR
City-State-Zip: ORLANDO FL 32836

Title MGR
Name GLICKMAN, JEFFREY M
Address 13750 W COLONIAL DR
STE 35
City-State-Zip: WINTER GARDEN FL 34787

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: MADELINE D RUSE

MANAGER

05/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date