

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000005458

**Entity Name:** BRFC 2013-A LLC

**Current Principal Place of Business:**

4950 COMMUNICATION AVE. STE 900  
BOCA RATON, FL 33431

**Current Mailing Address:**

4950 COMMUNICATION AVE. STE 900  
BOCA RATON, FL 33431

**FEI Number:** 46-3185731

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 US

**FILED**  
**Mar 21, 2022**  
**Secretary of State**  
**7373839454CC**

*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 INDEPENDENT MANAGER  
Name GRIER, JAMES L  
Address 2711 CENTERVILLE RD SUITE 400  
City-State-Zip: WILMINGTON DE 19808

Title MGR, PRESIDENT  
Name HUMPHREY, PAUL  
Address 4960 CONFERENCE WAY NORTH SUITE 100  
City-State-Zip: BOCA RATON FL 33431

Title MGR, VP, TREASURER  
Name LOPEZ, RAYMOND S  
Address 4960 CONFERENCE WAY NORTH SUITE 100  
City-State-Zip: BOCA RATON FL 33431

Title VP  
Name GILL, EVERETT  
Address 4950 COMMUNICATION AVE. STE 900  
City-State-Zip: BOCA RATON FL 33431

Title VP  
Name HUNT, JOHN  
Address 4950 COMMUNICATION AVE. STE 900  
City-State-Zip: BOCA RATON FL 33431

Title S  
Name DE LA OSA, JORGE  
Address 4950 COMMUNICATION AVE. STE 900  
City-State-Zip: BOCA RATON FL 33431

Title ASSISTANT SECRETARY  
Name EAST, MELISSA  
Address 4950 COMMUNICATION AVE. STE 900  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name BLUEGREEN VACATIONS CORPORATION  
Address 4950 COMMUNICATION AVE. STE 900  
City-State-Zip: BOCA RATON FL 33431

*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:** JORGE DE LA OSA

**S, BY LAUREN DUEMIG, 03/21/2022**  
**ATTORNEY-IN-FACT**

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

\_\_\_\_\_  
Date