

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000000173

**Entity Name:** VACATION WEEKS, LLC

**Current Principal Place of Business:**

ONE VANCE GAP ROAD  
ASHEVILLE, NC 28805

**Current Mailing Address:**

ONE VANCE GAP ROAD  
ASHEVILLE, NC 28805 US

**FEI Number:** 35-2478309

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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 MEMBER  
Name RESORT MANAGEMENT SERVICES,  
INC.  
Address ONE VANCE GAP RD  
City-State-Zip: ASHEVILLE NC 28805

*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:** RESORT MANAGEMENT SERVICES, INC.

MEMBER, BY JULIE  
PHILLIPS, ATTORNEY-IN-  
FACT

04/23/2019

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

\_\_\_\_\_  
Date