

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000053838

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** WELLINGTON VACATIONS, LLC

**Current Principal Place of Business:**

1930 HARRISON STREET  
SUITE 503  
HOLLYWOOD, FL 33020 US

**New Principal Place of Business:**

1930 HARRISON STREET  
SUITE 209  
HOLLYWOOD, FL 33020 US

**Current Mailing Address:**

1930 HARRISON STREET  
SUITE 503  
HOLLYWOOD, FL 33020 US

**New Mailing Address:**

1930 HARRISON STREET  
SUITE 209  
HOLLYWOOD, FL 33020 US

**FEI Number:** 20-1932715

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CITRINE MANAGEMENT SERVICES, INC.  
18851 NE 29TH AVE  
SUITE 1005  
AVENTURA, FL 33180 US

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

CITRINE MANAGEMENT SERVICES, INC.  
1930 HARRISON STREET  
SUITE 209  
HOLLYWOOD, FL 33020 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: CITRINE MANAGEMENT

04/16/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CITRINE MANAGEMENT SERVICES INC.  
Address: 1930 HARRISON STREET, SUITE 209  
City-St-Zip: HOLLYWOOD, FL 33020 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: CITRINE MANAGEMENT

MGR

04/16/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date