

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000006254

Entity Name: VACATION.COM, LLC

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1650 KING STREET, SUITE 450  
ALEXANDRIA, VA 22314

**New Principal Place of Business:**

**Current Mailing Address:**

1650 KING STREET, SUITE 450  
ALEXANDRIA, VA 22314

**New Mailing Address:**

FEI Number: 27-4396938

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: LOVELL, JOHN  
Address: 1650 KING STREET, SUITE 450  
City-St-Zip: ALEXANDRIA, VA 22314

Title: SVP  
Name: O'HARA, JOHN D  
Address: 1650 KING STREET, SUITE 450  
City-St-Zip: ALEXANDRIA, VA 22314

Title: T  
Name: LYNCH, WILLIAM  
Address: 119 WEST 40TH STREET  
City-St-Zip: NEW YORK, NY 10018

Title: SVP  
Name: BRILL, ROBERT S  
Address: 3033 CAMPUS DRIVE, SUITE W20  
City-St-Zip: PLYMOUTH, MN 55441

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: JOHN D O'HARA

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05/01/2012

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