

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000061322

Entity Name: B.L. VACATION OWNERSHIP, INC.

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7503 ATLANTIS WAY  
CELEBRATION, FL 34747 US

**New Principal Place of Business:**

**Current Mailing Address:**

3015 N OCEAN BLVD  
STE 121  
FORT LAUDERDALE, FL 33308 US

**New Mailing Address:**

FEI Number: 65-0826972      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FOSTER, REBECCA A  
3015 N. OCEAN BLVD. STE., 121  
FORT LAUDERDALE, FL 33308 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

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: LAMBERT, DANIEL  
Address: 2419 E. COMMERCIAL BLVD., #100  
City-St-Zip: FT LAUDERDALE, FL 33308

Title: DVT  
Name: VERILLO, JAMES  
Address: 2419 E. COMMERCIAL BLVD., #100  
City-St-Zip: FT LAUDERDALE, FL 33308

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL LAMBERT

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04/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date