

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000169173

**Entity Name:** VACATION LINK OF FLORIDA, INC.

**Current Principal Place of Business:**

501 N WYMORE RD  
WINTER PARK, FL 32789

**Current Mailing Address:**

501 N WYMORE RD  
WINTER PARK, FL 32789

**FEI Number:** 20-2023901

**Certificate of Status Desired:** No

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

SWANN, K. MICHAEL  
2250 LUCIEN WAY, SUITE 140  
MAITLAND, FL 32751 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

**Officer/Director Detail :**

Title D, P  
Name BIZAR, BRANDON  
Address 501 N WYMORE RD  
City-State-Zip: WINTER PARK FL 32789

*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:** BRANDON BIZAR

**PRESIDENT**

**01/09/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date