

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000011913

**Entity Name:** INTERVAL SOFTWARE SERVICES, LLC**Current Principal Place of Business:**6262 SUNSET DRIVE  
MIAMI, FL 33143**Current Mailing Address:**6262 SUNSET DRIVE  
MIAMI, FL 33143**FEI Number:** 65-1133709**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:** DIANA SERRA, VICE PRESIDENT

04/22/2013

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MANAGER, PRESIDENT  
Name NASH, CRAIG M  
Address 6262 SUNSET DRIVE  
City-State-Zip: MIAMI FL 33143

Title MANAGER, COO, EVP  
Name MARBERT, JEANETTE E  
Address 6262 SUNSET DRIVE  
City-State-Zip: MIAMI FL 33143

Title MANAGER, TREASURER, CFO, SVP  
Name GALEA, JOHN A  
Address 6262 SUNSET DRIVE  
City-State-Zip: MIAMI FL 33143

Title SVP  
Name LEE, MARIE A  
Address 6262 SUNSET DRIVE  
City-State-Zip: MIAMI FL 33143

Title SECRETARY, SVP  
Name KINCKE, VICTORIA J  
Address 6262 SUNSET DRIVE  
City-State-Zip: MIAMI FL 33143

Title ASST. SECRETARY  
Name WEST, JENNIFER A  
Address 6262 SUNSET DRIVE  
City-State-Zip: MIAMI FL 33143

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** VICTORIA J KINCKE

SECRETARY, SVP

04/22/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date