

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000095847

FILED
Feb 15, 2016
Secretary of State
CC9242275957

Entity Name: VACATION INN RESORT REALTY OF THE PALM BEACHES, LLC

Current Principal Place of Business:

6500 N. MILITARY TRAIL
WEST PALM BEACH, FL 33407

Current Mailing Address:

6500 N. MILITARY TRAIL
WEST PALM BEACH, FL 33407

FEI Number: 26-3814425

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAINES, ALAN L
6500 NORTH MILITARY TRAIL
WEST PALM BEACH, FL 33407 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: ALAN L. RAINES

02/15/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name TUHKANEN, JAMES
Address 6500 N. MILITARY TRAIL
City-State-Zip: WEST PALM BEACH FL 33407

Title MGR
Name MIZEN, DON
Address 6500 N. MILITARY TRAIL
City-State-Zip: WEST PALM BEACH FL 33407

Title MGR
Name PAQUIN, BERNARD
Address 6500 N. MILITARY TRAIL
City-State-Zip: WEST PALM BEACH FL 33407

Title MGR
Name SHEERAN, STEVE
Address 6500 N. MILITARY TRAIL
City-State-Zip: WEST PALM BEACH FL 33407

Title PRES
Name FARONI, ROSE
Address 6500 N MILITARY TRAIL
City-State-Zip: WEST PALM BEACH FL 33407

Title MANAGER
Name JOHNSON, JEAN-CLAUDE
Address 6500 N. MILITARY TRAIL
#287
City-State-Zip: WEST PALM BEACH FL 33407

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

SIGNATURE: ROSE FARONI

PRESIDENT

02/15/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date