

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000115473

Entity Name: CLC FRACTIONAL, LLC

Current Principal Place of Business:

% ENCANTADA RESORTS, ATTN: GEOFF BRUCE
3070 SECRET LAKE DRIVE
KISSIMMEE, FL 34747

Current Mailing Address:

% ENCANTADA RESORTS, ATTN: GEOFF BRUCE
3070 SECRET LAKE DRIVE
KISSIMMEE, FL 34747

FEI Number: 99-0382043

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DRIVE, STE. A
TALLAHASSEE, FL 32301 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

Authorized Person(s) Detail :

Title MANAGER
Name BRUCE, GEOFF
Address % ENCANTADA RESORTS, ATTN:
 GEOFF BRUCE
 3070 SECRET LAKE DRIVE
City-State-Zip: KISSIMMEE FL 34747

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: GEOFF BRUCE

MANAGER

01/22/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date