

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000092361

Entity Name: CORDOBA GARCIA VACATIONS LLC**Current Principal Place of Business:**7655 HERTIAGE CROSSING WAY
301
REUNION, FL 34747**Current Mailing Address:**610 SYCAMORE ST.
SUITE 170
CELEBRATION, FL 34747 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORDOBA GARCIA, RODRIGO
7655 HERITAGE CROSSING WAY
301
REUNION, FL 34747 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	MGR
Name	CORDOBA GARCIA, RODRIGO
Address	7655 HERTIAGE CROSSING WAY APT 301
City-State-Zip:	REUNION FL 34747

Title	MGR
Name	CORDOBA GARCIA, ALEJANDRO
Address	7655 HERITAGE CROSSING WAY APT 301
City-State-Zip:	REUNION FL 34747

Title	MGR
Name	CORDOBA GARCIA, SANTIAGO
Address	7655 HERITAGE CROSSING WAY APT 301
City-State-Zip:	REUNION FL 34747

Title	MGR
Name	CORDOBA GARCIA, MARGARITA M
Address	7655 HERITAGE CROSSING WAY APT 301
City-State-Zip:	REUNION FL 34747

Title	MGR
Name	GARCIA CHAVEZ, LILIANA
Address	7655 HERITAGE CROSSING WAY APT 301
City-State-Zip:	REUNION 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CORDOBA GARCIA, RODRIGO

MGR

03/26/2015

Electronic Signature of Signing Authorized Person(s) Detail_____
Date