

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000094391

**FILED  
Apr 29, 2015  
Secretary of State  
CC0957584821**

**Entity Name:** LATITUDE VACATION CLUB, LLC

**Current Principal Place of Business:**

610 B TRUMPET PLACE  
CELEBRATION, FL 34747

**Current Mailing Address:**

610 B TRUMPET PLACE  
CELEBRATION, FL 34747

**FEI Number:** 47-1105299

**Certificate of Status Desired:** No

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

NERI, GINA  
25 TOWN CENTER BLVD.  
CLERMONT, FL 34714 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 AMBR  
Name LATTA, CECIL  
Address 610 B TRUMPET PLACE  
City-State-Zip: CELEBRATION FL 34747

Title MGR  
Name LATTA, DAMARIS  
Address 610 B TRUMPET PLACE  
City-State-Zip: CELEBRATION FL 34747

Title MGR  
Name NERI, GINA  
Address 3317 BELLINGTON DRIVE  
City-State-Zip: ORLANDO FL 32385

*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:** CECIL LATTA

CEO

04/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date