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: BRENT BLAKEMAN

Electronic Signature of Signing Authorized Person(s) Detail

REGISTERED AGENT

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.

Electronic Signature of Registered Agent

SIGNATURE:

Authorized Person(s) Detail :				
Title	AP	Title	AP	
Name	BLAKEMAN, BRENT W	Name	MCCULLOCH, REBECCA L	
Address	2002 SW AARON LANE	Address	808 ENTERPRISE DRIVE	
City-State-Zip:	PORT SAINT LUCIE FL 34953	City-State-Zip:	VERONA WI 53593	

PORT SAINT LUCIE, FL 34953 US

Current Mailing Address:

Entity Name: CASTAWAY VACATION RENTALS, LLC

2002 SW AARON LANE

Current Principal Place of Business:

DOCUMENT# L16000216115

2002 SW AARON LANE PORT SAINT LUCIE. FL 34953

PORT SAINT LUCIE. FL 34953

FEI Number: 81-4587066

Name and Address of Current Registered Agent:

MCCULLOCH, ERIKA L 2002 SW AARON LANE

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2017 FLORIDA LIMITED LIADILITT COMPANT ANNUAL REFORT	

FILED Jan 11, 2017 Secretary of State CC3706323476

Certificate of Status Desired: No

Date

01/11/2017 Date