

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000194620

**Entity Name:** O.R VACATIONS HOMES LLC

**Current Principal Place of Business:**

8390 CHAMPIONS GATE BLVD  
100  
DAVENPORT, FL 33896

**Current Mailing Address:**

8390 CHAMPIONS GATE BLVD  
100  
DAVENPORT, FL 33896 US

**FEI Number:** 38-4048018

**Certificate of Status Desired:** No

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

OVALLE OSPINA, ALFONSO  
8390 CHAMPIONS GATE BLVD  
100  
DAVENPORT, FL 33896 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 MGRM  
Name OVALLE OSPINA, ALFONSO  
Address 8390 CHAMPIONS GATE BLVD  
100  
City-State-Zip: DAVENPORT FL 33896

Title MGRM  
Name ROZO MOLANO, DEISY MARGRETT  
Address 8390 CHAMPIONS GATE BLVD  
100  
City-State-Zip: DAVENPORT FL 33896

*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:** OVALLE OSPINA , ALFONSO

**DIRECTOR**

**01/23/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date