

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000114558

Entity Name: SANIBEL CAPTIVA ISLAND VACATION SERVICES, LLC

Current Principal Place of Business:

15951 CAPTIVA RD
CAPTIVA ISLAND, FL 33924

Current Mailing Address:

15951 CAPTIVA RD
CAPTIVA ISLAND, FL 33924 US

FEI Number: 83-0604760

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EBELINI, MARK A
1625 HENDY SR, STE 301
FT MYERS, FL 33901 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 BRYAN, RICHARD G JR
Address 6280 DAKOTA RIDGE DRIVE
City-State-Zip: LITTLETON CO 80125

Title MGR
Name CALVERT, GEORGE
Address 2985 RENNELLS ROAD
City-State-Zip: SPRING LAKE MI 49456

Title MGR
Name KELLEHER, JULIE MARGAUX
Address 2472 SUNNY KNOLL COURT
City-State-Zip: PARK CITY UT 84060

Title MGR
Name LAPI, ANTONINO R
Address 4341 WEST GULF DRIVE
City-State-Zip: SANIBEL FL 33957

Title MGR
Name BABCOCK, DOUGLAS
Address 2512 WULFERT ROAD
City-State-Zip: SANIBEL FL 33957

Title MANAGER
Name RUSSELL, MARK
Address 3743 JUNGLE PLUM DRIVE
City-State-Zip: EAST NAPLES FL 34114

Title MANAGER
Name FOUCHE, EDWARD
Address 6234 BLAKEFORD DRIVE
City-State-Zip: WINDERMERE FL 34786

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: ANTONINO R. LAPI

MANAGER

03/10/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date