

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000191357

**Entity Name:** ALLIANCE RESERVATIONS NETWORK, LLC

**Current Principal Place of Business:**

6277 SEA HARBOR DRIVE  
ORLANDO, FL 32821

**Current Mailing Address:**

7380 WEST SAND LAKE ROAD  
SUITE 420  
ORLANDO, FL 32819 US

**FEI Number: 86-0920239**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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           MANAGER  
Name           MOTSENBOCKER, TERRY D  
Address        9998 N. MICHIGAN ROAD  
City-State-Zip: CARMEL IN 46032

Title           MANAGER  
Name           SINELLI, AMY E  
Address        6277 SEA HARBOR DRIVE  
City-State-Zip: ORLANDO FL 32821

Title           ASSISTANT SECRETARY  
Name           JAGIELSKI, STACEY  
Address        6277 SEA HARBOR DRIVE  
City-State-Zip: ORLANDO FL 32821

*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: STACEY JAGIELSKI**

**ASST. SECRETARY**

**04/27/2023**

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

\_\_\_\_\_  
Date