



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

**ANNUAL REPORT YEAR:** 2014

**1. ID No.** 000718945

**2. Exact Name of the Limited Liability Company** LVC Timeshare Developer, LLC

**3. State of Formation**

State: FL

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

Legacy will be advertising in the state of Rhode Island for rentals of its vacation ownership villas.

**5. Principal Office Address**

No. and Street: 8451 PALM PARKWAY  
City or Town: LAKE BUENA VISTA State: FL Zip: 32838 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name:      Contact Title:  
No. and Street: P.O. BOX 690999  
City or Town: ORLANDO State: FL Zip: 32869 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	LVC HOLDING CO., LLC	8451 PALM PARKWAY LAKE BUENA VISTA, FL 32836 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST  
PROVIDENCE , RI 02914

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 24 Day of September, 2014 at 4:04:36 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By ANTHONY PICCIANO  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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