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Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000068991 (7)**

1. Corporation Name
HOLIDAY VILLAGE OF SANDPIPER, INC.

Principal Place of Business	Mailing Address
3500 SE MORNINGSIDE BLVD. PORT ST. LUCIE FL 34952	CLUB MED MGMT. SERVICES. INC. 40 WEST 57TH ST. NEW YORK NY 10019

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/05/1993

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: 65-0439807 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS ST. STE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	DP	☐ Change ☒ Addition
NAME	SERGE TRIGANO,		1.2 NAME	ROLL, PAUL	
STREET ADDRESS	3500 SE MORNINGSIDE BLVD.		1.3 STREET ADDRESS	3500 SE MORNINGSIDE BLVD.	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952		1.4 CITY-ST-ZIP	PORT ST. LUCIE FL 34952	
TITLE	VPD	☐ DELETE	2.1 TITLE	D CFO	☒ Change ☐ Addition
NAME	HOH KOON AU YEONG,		2.2 NAME	AU YEONG, HOH KOON	
STREET ADDRESS	3500 SE MORNINGSIDE BLVD.		2.3 STREET ADDRESS	3500 SE MORNINGSIDE BLVD.	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952		2.4 CITY-ST-ZIP	PORT ST. LUCIE FL 34952	
TITLE	ST	☒ DELETE	3.1 TITLE	V	☐ Change ☒ Addition
NAME	TOWNSEND, JOSEPH J		3.2 NAME	DE BORTOLI, SYLVIO	
STREET ADDRESS	3500 SE MORNINGSIDE BLVD.		3.3 STREET ADDRESS	3500 SE MORNINGSIDE BLVD.	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952		3.4 CITY-ST-ZIP	PORT ST. LUCIE FL 34952	
TITLE		☐ DELETE	4.1 TITLE	T	☐ Change ☒ Addition
NAME			4.2 NAME	BYSTROM, JAYNE	
STREET ADDRESS			4.3 STREET ADDRESS	3500 SE MORNINGSIDE BLVD.	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	PORT ST. LUCIE, FL 34952	
TITLE		☐ DELETE	5.1 TITLE	S	☐ Change ☒ Addition
NAME			5.2 NAME	DONAT, MARSHALL	
STREET ADDRESS			5.3 STREET ADDRESS	3500 SE MORNINGSIDE BLVD.	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	PORT ST. LUCIE FL 34952	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: MARSHALL J. DONAT _____ January 7, 1998 (212) 977-2122