

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90109 043 ***150.00

DOCUMENT # P98000035449

1. Corporation Name

CLUB SUNTERRA, INC.

Principal Place of Business

**1781 PARK CENTER DRIVE
ORLANDO FL 32835**

Mailing Address

**1781 PARK CENTER DRIVE
ORLANDO FL 32835**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/17/1998

4. FEI Number

59-3510037

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

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 the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☒ DELETE

TITLE **D**
NAME **KENNINGER, STEVEN C**
STREET ADDRESS **5033 W. CENTURY BLVD.**
CITY-ST-ZIP **LOS ANGELES CA 90045**

TITLE **D**
NAME **FREY, CHARLES C**
STREET ADDRESS **1781 PARK CENTER DR.**
CITY-ST-ZIP **ORLANDO FL 32835**

TITLE **D**
NAME **SHOBRIDGE, PETER J.**
STREET ADDRESS **1781 PARK CENTER DR.**
CITY-ST-ZIP **ORLANDO FL 32835**

TITLE **D**
NAME **HUTTON, ANDREW J.**
STREET ADDRESS **1075 GRANT STREET, STE 650**
CITY-ST-ZIP **SAN MATEO CA 94402**

TITLE **D**
NAME **GIANNONI, GENEVIEVE**
STREET ADDRESS **1781 PARK CENTER DRIVE**
CITY-ST-ZIP **ORLANDO FL 32835**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE **DP**
1.2 NAME **L. Steven Miller**
1.3 STREET ADDRESS **1781 Park Center Drive**
1.4 CITY-ST-ZIP **Orlando, FL 32835**

2.1 TITLE **DT**
2.2 NAME **Richard Goodman**
2.3 STREET ADDRESS **1781 Park Center Drive**
2.4 CITY-ST-ZIP **Orlando, FL 32835**

3.1 TITLE **DS**
3.2 NAME **Thomas A. Bell**
3.3 STREET ADDRESS **1781 Park Center Drive**
3.4 CITY-ST-ZIP **Orlando, FL 32835**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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, with an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/99

Date

532-1000

Daytime Phone #

CR2E034 (1/98)