

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90136 037 ***150.00

DOCUMENT # P98000106242

1. Entity Name
CERTIFIED VACATIONS GROUP, INC.

Principal Place of Business Mailing Address
110 E. BROWARD BLVD. **110 E. BROWARD BLVD.**
FORT LAUDERDALE FL 33301 **FORT LAUDERDALE FL 33301-3503**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **65-0832784** **APPLIED FOR** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

SMITH, DENNIS D
C/O TRIPP SCOTT
110 S.E. 6TH STREET, 15TH FLOOR
FORT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE	CCD <input type="checkbox"/> Delete
NAME	EGAN, MICHEAL S
STREET ADDRESS	110 E BROWARD BLVD
CITY-ST-ZIP	FORT LAUDERDALE FL 33301
TITLE	PT <input type="checkbox"/> Delete
NAME	ALLEN, CELESTE V
STREET ADDRESS	110 E BROWARD BLVD
CITY-ST-ZIP	FORT LAUDERDALE FL 33301
TITLE	S <input type="checkbox"/> Delete
NAME	NORMAN, TRIPP
STREET ADDRESS	110 E BROWARD BLVD
CITY-ST-ZIP	FORT LAUDERDALE FL 33301
TITLE	AT <input checked="" type="checkbox"/> Delete
NAME	FISHER, ROBERT
STREET ADDRESS	110 E BROWARD BLVD
CITY-ST-ZIP	FORT LAUDERDALE FL 33301
TITLE	ASD <input type="checkbox"/> Delete
NAME	ARTHUR, ROSALIE
STREET ADDRESS	110 E BROWARD BLVD
CITY-ST-ZIP	FORT LAUDERDALE FL 33301
TITLE	AS <input type="checkbox"/> Delete
NAME	SEGAUL, ROBIN
STREET ADDRESS	110 E BROWARD BLVD
CITY-ST-ZIP	FORT LAUDERDALE FL 33301

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	P/T/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Steven Nouss
STREET ADDRESS	100 E. Broward Blvd.
CITY-ST-ZIP	Fort Lauderdale, FL 33301
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN NOUSS 4/5/00 954-357-4637
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

943414

CERTIFIED VACATIONS GROUP, INC.

EIN 65-0888405

Document # P98000106242

2000 Uniform Business Report

Title	D	Addition
Name	William H. Kelly, Jr.	
Street Address	55 East Monroe St, #4620	
City-St-Zip	Chicago, IL 60603	

Title	D	Addition
Name	Edward J. Morse	
Street Address	6363 NW 6 Way, Suite 400	
City-St-Zip	Fort Lauderdale, FL 33309	

Title	D	Addition
Name	John T. Mooney	
Street Address	110 E. Broward Blvd.	
City-St-Zip	Fort Lauderdale, FL 33301	