FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

1. Corporat on Name

PLANTATION BEACH CLUB OWNERS' ASSOCIATION, INC.

Mailing Address Principal Place of Business South Seas Plantation Captiva, FL 33924

Country

9. Name and Address of Current Registered Agent

13391 McGregor Boulevard Fort Myers, FL 33919-5996

1509 Periwinkle Way

Sanibel Island, FL

Country

US

81 Name

30

2a. Mailing Address

City & State

33957

Zip

Suite, Apt. #, etc.

26

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FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90141 028 ****61.25

3. Date Incorporated or Qualifed

11/01/1976

5. Certifcate of Status Desired

6. Election Campaign Financing

10. Name and Address of New Registered Agent

Trust Fund Contribution

4. FEI Number 59-1799710

HILTON GRAND VACATIONS COMPANY		82	Street A	Ad Iress (P.O. Box Number is Not Acceptable)	-		
1509 Periwinkle Way							
Sani	bel Island, FL 33957	83					
	·	84	City		85	Zip Ci	de
	_		•		[<u></u>		
11. Pursuar t te	o the provisions of Sections 617.0502 and 617.1508, Florida Statutes, gistered agent, or both, in the State of Florida. Such change was auth	the above	-named	colporation submits this statement for the purpose	of chang	ing its r	egistered
office or re agent. I an	gistered agent, or both, in the State of Florida, Such change was auth n familiar with, and accept the obligations of, Section 617.0503, Florida	a Statutes	ine corpo	ila foir s buaid of directors. Thereby accept the up	p-municin	do rog	,,,,,,,,,
SIGNATURE	, -						
SIGNATION	Signature, types of printed rate of organization		t signature re	paqui ed when reinstating) DATE			
12.	OFFICERS AND DIRECTORS	13.		ADDITIC NS/CHANGES TO OFFICERS			RS IN 12
TITLE	PD DELETE	1.1 TITLE			ΠC	nange	☐ Addition
NAME	ANDERSON, NORBERT J.	12 NAME					
STREET ADDRESS	513 South East Avenue	13 STREET	ADDRESS				
CITY-ST-ZIP	Baltimore, MD 21224	14 CITY-ST	-ZIP				F777 & 1.10(1)
TITLE	D DELETE	2.1 TITLE		D	Œιc	hange	☐ Addition
NAME	CARTER, ROBERT	2.2 NAME		CARTER, ROBERT			
STREET ADDRESS	11 E 18th Street	2.3 STREE	ADDRESS	14511 Hickory Hill Court	#511		
CITY-ST-ZIP	Bayonne, NJ	2. 4 CITY-S	T-ZIP	Fort Myers. FL 33913			
TITLE	STD DELETE	3.1 TITLE			□ c	hange	☐ Addition
NAME	KENDALL, RALPH	3.2 NAME					
STREET ADDRESS	940 Brynwood Drive	3.3 STREET	ADDRESS				
CITY-ST-ZIP	Chattanooga, TN 37415	34 CITY-5	T-ZIP				
TITLE	D DELETE	4.1 TITLE			□с	hange	Addition
NAME	MEADOWS, MICHELLE	4. 2 NAME					
STREET ADDRESS	23 Windsor Lane	4.3 STREET	ADDRESS				
CITY-ST-ZIP	Palm Beach Gardens, FL 33418	4 4 CITY-S	-ZIP				
TITLE	VD DELETE	5.1 TITLE			□ CI	nange	☐ Addition
NAME	HOYMAN, MICHAEL	5.2 NAME					
STREET ADDRESS	2203 McGregor Park Circle	5.3 STREE	ADDRESS				
CITY-ST-ZIP	Fort Myers, FL 33908	5.4 CITY-S	r-ZIP				
TITLE	□ DELETE	61 TITLE				nange	☐ Addition
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET	ADDRESS				į
CITY-ST-ZIP		6.4 CITY-S	r-ZIP				
14 I bereby or	ertify that the information supplied with this filing does not qualify for the	ne exempti	on stated	in Section 119,07(3)(i), Florida Statutes, I further	certify tha	t the in	formation

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other fike empowered.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Applied For

\$8.75 Acditional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable