2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # F93000004687

1. Entity Name
HILTON RESORTS CORPORATION

Principal Place of Business	Mailing Address
C/O HILTON HOTELS CORPORATION 9336 CIVIC CENTER DRIVE BEVERLY HILLS, CA 90210	C/O HILTON HOTELS CORPORATION 9336 CIVIC CENTER DRIVE BEVERLY HILLS, CA 90210

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04022004 No Chg-P CR2E034 (10/03)

4. FEI Number
95-4349751
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

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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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

000000141274
04/30/04-80005-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	PCED
NAME	DAGOT, ANTOINE
STREET ADDRESS	6335 METRO WEST BLVD., STE. 180
CITY-ST-ZIP	ORLANDO, FL 32835
TITLE	VPAS
NAME	SMITH III, M HUE
STREET ADDRESS	9336 CIVIC CENTER DR
CITY-ST-ZIP	BEVERLY HILLS, CA 90210
TITLE	EVPD
NAME	HART, MATTHEW J
STREET ADDRESS	9336 CIVIC CENTER DR.
CITY-ST-ZIP	BEVERLY HILLS, CA 90210
TITLE	CFO
NAME	HART, MATTHEW J
STREET ADDRESS	9336 CIVIC CENTER DR.
CITY-ST-ZIP	BEVERLY HILLS, CA 90210
TITLE	SVPD
NAME	PONTIUS, DAVID L
STREET ADDRESS	6355 METRO WEST BLVD., STE. 180
CITY-ST-ZIP	ORLANDO, FL 32835
TITLE	VLSD
NAME	SLOAN, REBECCA L
STREET ADDRESS	6355 METRO WEST BLVD., STE. 180
CITY-ST-ZIP	ORLANDO, FL 32835

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: M. HUE SMITH, III 4.27.04 310.278.4321
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #