


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90188 011 ****61.25

DOCUMENT # N93000003317	
1. Entity Name BLUEGREEN VACATION CLUB, INC.	

Principal Place of Business 4960 CONFERENCE WAY NORTH SUITE 100 BOCA RATON, FL 33431	Mailing Address 4960 CONFERENCE WAY NORTH SUITE 100 BOCA RATON, FL 33431
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

40073410



04172006 Chg-NP CR2E037 (11/05)

4. FEI Number 65-0462831	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. See attached list. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE S	<input checked="" type="checkbox"/> Delete	TITLE DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TAYLOR, CYNTHIA		NAME Cynthia Taylor	
STREET ADDRESS 4960 CONFERENCE WAY NORTH, SUITE 100		STREET ADDRESS 4960 Conference Way North, Suite 100	
CITY-ST-ZIP BOCA RATON, FL 33431		CITY-ST-ZIP Boca Raton, Florida 33431	
TITLE T	<input checked="" type="checkbox"/> Delete	TITLE DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WARDAK, AHMAD		NAME Ahmad Wardak	
STREET ADDRESS 4960 CONFERENCE WAY NORTH, SUITE 100		STREET ADDRESS 4960 Conference Way North, Suite 100	
CITY-ST-ZIP BOCA RATON, FL 33431		CITY-ST-ZIP Boca Raton, Florida 33431	
TITLE DVP	<input checked="" type="checkbox"/> Delete	TITLE DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME TOMPKINS, RANDI S		NAME Kathy Foster	
STREET ADDRESS 4960 CONFERENCE WAY NORTH, SUITE 100		STREET ADDRESS 4960 Conference Way North, Suite 100	
CITY-ST-ZIP BOCA RATON, FL 33431		CITY-ST-ZIP Boca Raton, Florida 33431	
TITLE PD	<input checked="" type="checkbox"/> Delete	TITLE DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME MALONEY, JOHN		NAME Ellen Devine	
STREET ADDRESS 4960 CONFERENCE WAY NORTH, SUITE 100		STREET ADDRESS 4960 Conference Way North, Suite 100	
CITY-ST-ZIP BOCA RATON, FL 33431		CITY-ST-ZIP Boca Raton, Florida 33431	
TITLE D	<input checked="" type="checkbox"/> Delete	TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME HODGES, BRENDA		NAME Margie Lennon	
STREET ADDRESS 4960 CONFERENCE WAY NORTH, SUITE 100		STREET ADDRESS 1435 Claret Court	
CITY-ST-ZIP BOCA RATON, FL 33431		CITY-ST-ZIP Ft. Myers, Florida 33919	
TITLE D	<input checked="" type="checkbox"/> Delete	TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME DODD, TERRY		NAME Julie Hutter	
STREET ADDRESS 4960 CONFERENCE WAY NORTH, SUITE 100		STREET ADDRESS 11520 Dogwood Lane	
CITY-ST-ZIP BOCA RATON, FL 33431		CITY-ST-ZIP Ft. Myers Beach, Florida 33931	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, 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:  **Cynthia Taylor, Secretary** **561-912-8000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Bluegreen Vacation Club, Inc.

ATTACHMENT

40079216

#1093000003317

Officers:

Directors:

Kathy Foster, President
4960 Conference Way North, Suite 100
Boca Raton, Florida 33431

Kathy Foster
4960 Conference Way North, Suite 100
Boca Raton, Florida 33431

Cynthia Vasquez, Secretary
4960 Conference Way North, Suite 100
Boca Raton, Florida 33431

Cynthia Vasquez
4960 Conference Way North, Suite 100
Boca Raton, Florida 33431

Ahmad, Wardak, Treasurer
4960 Conference Way North, Suite 100
Boca Raton, Florida 33431

Ahmad, Wardak
4960 Conference Way North, Suite 100
Boca Raton, Florida 33431

Ellen Devine, Vice President
4960 Conference Way North, Suite 100
Boca Raton, Florida 33431

Ellen Devine
4960 Conference Way North, Suite 100
Boca Raton, Florida 33431

Margie Lennon
1435 Claret Court
Ft. Myers, FL 33919

Julie Hutter
11520 Dogwood Lane
Ft. Myers Beach, Florida 33931

Guylene Kelley
449 Gulf Stream Drive
Winter Haven, Florida 33881