2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
09 FEB 17 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400143744624
02/17/09--01010--006 **300.00

DOCUMENT # F04000004387

1. Entity Name
CNL RESORT CLAREMONT TENANT CORP.

Principal Place of Business	Mailing Address
420 S. ORANGE AVENUE STE. 700 ORLANDO, FL 32801	PO BOX 2226 ORLANDO, FL 32802

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1 POST OFFICE SQUARE	1 POST OFFICE SQUARE
Suite, Apt. #, etc 3100	Suite, Apt. #, etc 3100
City, State BOSTON, MA	City, State BOSTON, MA
Zip 02109	Zip 02109
Country	Country

12222008 REIN-P CR2E098 (1/07)

4. FEI Number
20-1400224
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

THOMAS, STEPHANIE J
420 S. ORANGE AVENUE
STE. 700
ORLANDO, FL 32801

7. Name and Address of New Registered Agent

Name
CT Corporation System
1200 S Pine Island Rd, Suite 250
Plantation, Florida 33324

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

SIGNATURE: Connie Bryan Assistant Secretary 2/2/09
Signature, type or print name of registered agent & title if applicable — Date

FILE NOW!!! FEE IS $150.00
After January 1, 2009, Fee will be $300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVP BLOOM, BARRY A.N. 420 S. ORANGE AVENUE, STE. 700 ORLANDO, FL 32801 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ☐ Change ☐ Addition Karamjit S. Kalsi 1585 Broadway New York, NY 10036
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT BOURNE, ROBERT A 450 S. ORANGE AVENUE ORLANDO, FL 32801 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ☐ Change ☐ Addition Michael T. Quinn 1585 Broadway New York, NY 10036
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP GRISWOLD, JOHN A 420 S. ORANGE AVENUE, STE. 700 ORLANDO, FL 32801 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ☐ Change ☐ Addition Michael J. Franco 1585 Broadway New York, NY 10036
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DCEO HUTCHISON, THOMAS J III 420 S ORANGE AVENUE, STE. 700 ORLANDO, FL 32801 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ☐ Change ☐ Addition Daniel C. Wright 1 Post Office Square Ste 3100 Boston MA, 02109
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS THOMAS, STEPHANIE J 420 S ORANGE AVENUE, STE. 700 ORLANDO, FL 32801 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ☐ Change ☐ Addition Warren Fields 1 Post Office Square Ste 3100 Boston MA, 02109
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEVP STRICKLAND, C BRIAN 420 S. ORANGE AVENUE, STE. 700 ORLANDO, FL 32801 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ☐ Change ☐ Addition Jim Dina 1 Post Office Square Ste 3100 Boston MA, 02109

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I hereby 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: Daniel C. Wright VP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2NB