

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43112

Entity Name: VACATION VILLAS AT FANTASYWORLD TIME-SHARE
OWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**5005 KYNGS HEATH ROAD
KISSIMMEE, FL 34746**Current Mailing Address:**5005 KYNGS HEATH ROAD
KISSIMMEE, FL 34746**FEI Number: 59-3063633****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WEINLAND, JEFFREY T
7320 FARINGTON COURT
ORLANDO, FL 32819 US*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: JEFFREY T WEINLAND

03/27/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	WEINLAND, JEFFREY THOMAS
Address	7320 FARINGTON COURT
City-State-Zip:	ORLANDO FL 32819

Title	D
Name	WASHINGTON, ARTHUR
Address	456 MEADOW RIDGE DRIVE
City-State-Zip:	TALAHASSEE FL 32312

Title	STD
Name	EJUWA, JONATHAN
Address	4702 STRATFORD LANE
City-State-Zip:	EAGAN MN 55123

Title	DIRECTOR
Name	SLADKEY, JOHN
Address	12812 LINDEN
City-State-Zip:	LEAWOOD KS 66209

Title	VP
Name	FURLONG, RICHARD
Address	677 UNION STREET
City-State-Zip:	ROCKLAND MA 02370

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY T WEINLAND

PRESIDENT

03/27/2019

Electronic Signature of Signing Officer/Director Detail

Date