FEI NUMBER 59-3325003		Certificate of Status Desired: NO		
Name and A	ddress of Current Registered Agent:			
CAPITOL CORF 515 EAST PARF 2ND FL	PORATE SERVICES, INC. KAVENUE			
TALLAHASSEE	, FL 32301 US			
The above named	l entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Florida.	
SIGNATURE	E DELANIE CASE		0	1/29/2018
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	DIRECTOR & PRESIDENT	Title	VICE PRESIDENT & TREASURER	
Name	POTROCK, KENNETH M	Name	SCHULTZ, TERRI A	
Address	1390 CELEBRATION BOULEVARD	Address	1390 CELEBRATION BOULEVARD	
City-State-Zip:	CELEBRATION FL 34747	City-State-Zip:	CELEBRATION FL 34747	
Title	DIRECTOR	Title	DIRECTOR, VICE PRESIDENT & SECRETARY	
Name	NIEMAN, LEIGH ANNE	Name	CHANG, YVONNE	
Address	1390 CELEBRATION BOULEVARD	Address	1390 CELEBRATION BOULEVARD	
City-State-Zip:	CELEBRATION FL 34747	City-State-Zip:	CELEBRATION FL 34747	
Title	DIRECTOR, VICE PRESIDENT & ASSISTANT SECRETARY	Title	VICE PRESIDENT & ASSISTANT TREASURER	
Name	DHANANI, MAHMUD	Name	HEALY, ELIZABETH	
Address	1390 CELEBRATION BOULEVARD	Address	1390 CELEBRATION BOULEVARD	
City-State-Zip:	CELEBRATION FL 34747	City-State-Zip:	CELEBRATION FL 34747	
Title	DIRECTOR & VICE PRESIDENT			
Name	SAKASKE, SHANNON			
Address	1390 CELEBRATION BOULEVARD			
City-State-Zip:	CELEBRATION FL 34747			

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005467

Entity Name: DISNEY VACATION CLUB AT VERO BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1390 CELEBRATION BOULEVARD CELEBRATION, FL 34747

Current Mailing Address:

1390 CELEBRATION BOULEVARD CELEBRATION, FL 34747

FEI Number: 59-3325803

N

Certificate of Status Desired: No

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: YVONNE CHANG

DIRECTOR

01/29/2018

Electronic Signature of Signing Officer/Director Detail

FILED Jan 29, 2018 Secretary of State CC4831910738