

**2013 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# M30499

**Entity Name:** RESORT MANAGEMENT SERVICES INC.**Current Principal Place of Business:**3626 QUADRANGLE BLVD  
STE 300  
ORLANDO, FL 32817**Current Mailing Address:**ONE VANCE GAP ROAD  
ATTN: LEGAL DEPT.  
ASHEVILLE, NC 28805 US**FEI Number:** 59-2689878**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KOSMAS, JAMES M  
111 LIVE OAK STREET  
NEW SMYRNA BEACH, FL 32168 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	DIRECTOR, PRESIDENT, CEO
Name	HORTON, WILL
Address	ONE VANCE GAP ROAD ATTN: LEGAL DEPT.
City-State-Zip:	ASHEVILLE NC 28805

Title	DIRECTOR, COO
Name	STYRON, SCOTT
Address	ONE VANCE GAP ROAD ATTN: LEGAL DEPT.
City-State-Zip:	ASHEVILLE NC 28805

Title	SECRETARY
Name	GAYLORD, BROOKS
Address	ONE VANCE GAP ROAD ATTN: LEGAL DEPT.
City-State-Zip:	ASHEVILLE NC 28805

Title	TREASURER
Name	PATENOTTE, DENNIS
Address	ONE VANCE GAP ROAD ATTN: LEGAL DEPT.
City-State-Zip:	ASHEVILLE NC 28805

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WILL HORTON

PRESIDENT

09/19/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date