### Electronic Signature of Signing Officer/Director Detail

above, or on an attachment with all other like empowered.

SIGNATURE: KATHY FOSTER

### SIGNATURE:

Electronic Signature of Registered Agent

## **Officer/Director Detail :**

Title	ASST. SECRETARY	Title	VP
Name	EAST, MELISSA	Name	KELLEY, ADRIENNE
Address	4960 CONFERENCE WAY NORTH, SUITE 100	Address	4960 CONFERENCE WAY NORTH SUITE 100
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431
Title	SECRETARY	Title	VP
Name	DE LA OSA, JORGE	Name	WILLARD, LEE ANN
Address	4960 CONFERENCE WAY NORTH SUITE 100	Address	4960 CONFERENCE WAY NORTH SUITE 100
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431
Title	VP	Title	ASSISTANT VICE PRESIDENT
Title Name	VP HUMPHREY, PAUL	Title Name	ASSISTANT VICE PRESIDENT EGOLF, RICHARD
Name	HUMPHREY, PAUL 4960 CONFERENCE WAY NORTH	Name	EGOLF, RICHARD 4960 CONFERENCE WAY NORTH SUITE 100
Name Address	HUMPHREY, PAUL 4960 CONFERENCE WAY NORTH SUITE 100	Name Address	EGOLF, RICHARD 4960 CONFERENCE WAY NORTH SUITE 100
Name Address City-State-Zip:	HUMPHREY, PAUL 4960 CONFERENCE WAY NORTH SUITE 100 BOCA RATON FL 33431	Name Address City-State-Zip:	EGOLF, RICHARD 4960 CONFERENCE WAY NORTH SUITE 100 BOCA RATON FL 33431
Name Address City-State-Zip: Title	HUMPHREY, PAUL 4960 CONFERENCE WAY NORTH SUITE 100 BOCA RATON FL 33431 TREASURER, VP, DIRECTOR	Name Address City-State-Zip: Title	EGOLF, RICHARD 4960 CONFERENCE WAY NORTH SUITE 100 BOCA RATON FL 33431 PRESIDENT, DIRECTOR

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

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.

# **Current Principal Place of Business:** 4960 CONFERENCE WAY NORTH

Entity Name: PINNACLE VACATIONS, INC.

SUITE 100 BOCA RATON, FL 33431

## **Current Mailing Address:**

4960 CONFERENCE WAY NORTH SUITE 100 BOCA RATON, FL 33431 US

## FEI Number: 20-3704976

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC. 801 US HIGHWAY 1 NORTH PALM BEACH, FL 33408 US

## 2022 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT DOCUMENT# F0500006257

05/06/2022 BY: NICHOLAS NICHOLS, ATTORNEY-IN-FACT

Date

Certificate of Status Desired: No

FILED May 06, 2022 Secretary of State 0198364078CC