# 2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000004058

Entity Name: HILTON GRAND VACATIONS INC.

**Current Principal Place of Business:** 

6355 METROWEST BOULEVARD SUITE 180 ORLANDO, FL 32835

# **Current Mailing Address:**

6355 METROWEST BOULEVARD SUITE 180 ORLANDO, FL 32835 US

# FEI Number: 81-2545345

#### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

# FILED Apr 23, 2024 Secretary of State 7036498912CC

Certificate of Status Desired: No

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

#### **Officer/Director Detail :**

Title	PRESIDENT, CFO	Title	SECRETARY, EXECUTIVE VICE
Name	MATHEWES, DANIEL	Name	
Address	5323 MILLENIA LAKES BLVD. SUITE 400	Name Address	CORBIN, CHARLES 5323 MILLENIA LAKES BLVD.
City-State-Zip:	ORLANDO FL 32839	City-State-Zip:	SUITE 400 ORLANDO FL 32839
Title	SENIOR VICE PRESIDENT	Title	DIRECTOR
Name	HILTON, MICHAEL		
Address	6355 METROWEST BOULEVARD	Name	VAN HOEK, ALEX
	SUITE 180	Address	6355 METROWEST BOULEVARD SUITE 180
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835
Title	DIRECTOR	Title	
Name	BACON, BRENDA		DIRECTOR
Address	6355 METROWEST BOULEVARD	Name	JOHNSON, DAVID
0.110 01010 7.10	SUITE 180	Address	6355 METROWEST BOULEVARD SUITE 180
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835
Title			
	DIRECTOR	T:41 -	DIRECTOR
Name	DIRECTOR SAMBUR, DAVID	Title	DIRECTOR
	SAMBUR, DAVID	Title Name	DIRECTOR POTTER, LEONARD
Name Address City-State-Zip:	SAMBUR, DAVID 6355 METROWEST BOULEVARD SUITE 180		

#### Continues on page 2

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: CHARLES CORBIN

SECRETARY

04/23/2024

Date

Electronic Signature of Signing Officer/Director Detail

#### **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	LAZARUS, MARK	Name	PATSLEY, PAMELA
Address	6355 METROWEST BOULEVARD SUITE 180	Address	6355 METROWEST BOULEVARD SUITE 180
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835
Title	DIRECTOR	Title	CEO, DIRECTOR
Name	WHETSELL, PAUL	Name	WANG, MARK
Address	6355 METROWEST BOULEVARD SUITE 180	Address	5323 MILLENIA LAKES BLVD. SUITE 400
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32839