FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 648161

(8)

Feb 17 1998 8:00am
Secretary of State

FILED

VACAT	TION EQUITIES, INC.	. ,			184 3 48 / 346 / 346 / 3 48/ 3 78/ 34	F () 1/1 () (11)
Principal Plac	ce of Business	Mailing Address			KB BIBII ORBI BAÇA BIÇA 31	
2508 GULF OF MEXICO DRIVE 2509 GULF OF MEXICO DRIVE			DONE			
LONGBOAT KEY FL 34228-3104 LONGBOAT KEY FL 34228-3						
					E IN THIS SPACE	
i				3. Date Incorporated or Qualified		
2. Principal F	Place of Business	2a. Mailing Address		12/13/1979		
		⊢ ¬ • • • • • • • • • • • • • • • • • • •		4. FEI Number		Applied For
		Suite. Apt. #, etc.		59-1960696		lot Applicable
City & State		27		5. Certificate of Status Desired	Fee F	Additional Required
23		City & State		6. Election Campaign Financing		May Be
Zip	Country	28	Country	Trust Fund Contribution		to Fees
24	25	29	30	This corporation owes or has personal Property Tax due June		ntangible ⊟ □ No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
MF	SHAD, JOHN W.					
4000 PMOLINO PLVD			99 Chrost 4 day	/DO D. II.		
SARASOTA FL			82 Street Addre	ess (P.O. Box Number is Not Accepta	ble)	1
			83			
			84 City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the above-named corpo	oration submits this statement for the	nurnose of changing	its registered
agent. 1 a	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was a flions of, Section 607.0505, Flo	authorized by the corporation	on's board of directors. I hereby acce	pt the appointment a	s registered
SIGNATURE						
	Signature, typed or printed name of registered ages		Registered Agent signature require		DATE	
12.	OFFICERS AND	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFIC		
NAME		☐ DECEIE	1.1 TITLE		L Change	Addition
STREET ADDRESS	KLAUBER, MURRAY J 1620 GULF OF MEXICO DR.		1.2 NAME			
CITY-ST-ZIP	LONGBOAT KEY FL		1.3 STREET ADDRESS			
TITLE	DP DP	DELETE	1.4 CITY-ST-ZIP 2.1 THLE		Change	L Addition
NAME	SAUNDERS, MICHAEL	_ vittle	2.2 NAME		☐ Change	Addition
STREET ADDRESS	7300 GULF OF MEXICO DR		· ·			
CITY-ST-ZIP	LONGBOAT KEY FL		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			ł
TITLE	DS	DELETE	3.1 TITLE		☐ Change	Addition
NAME	COLLINGWOOD, C.G.		3.2 NAME		பெய்ழ	
STREET ADDRESS	259 CEDAR PARK CIRCLE		3.3 STREET ADDRESS			
CITY-ST-ZIP	SIESTA KEY FL		3.4. CITY-ST-ZIP			
TITLE	T	DELETE	41 TITLE		☐ Change	Addition
NAME	EISEMAN, SAUL		4. 2 NAME			
STREET ADDRESS	61 S BLVD OF PRESIDENTS		4.3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL		4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CiTY - ST - ZiP			
TITLE		☐ DELETE	6.1 TITLE	-	☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			ĺ
CITY-ST-ZIP			6.4 CITY - ST - ZIP		<u> </u>	
14. I nereby o	certify that the information supplied wi	n this filing does not qualify fo	r the exemption stated in S	Section 119.07(3)(i), Florida Statutes. I	further certify that the	information

indicated on this annual report or surplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 12 or Block 13 if changed, of on an attachment with an address

941/951-6600