

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747788

FILED
Mar 27, 2009
Secretary of State

Entity Name: PLANTATION BEACH CLUB III OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

SOUTH SEAS PLANTATION
CAPTIVA, FL 33924 US

New Principal Place of Business:

Current Mailing Address:

1509 PERIWINKLE WAY
SANIBEL, FL 33957 US

New Mailing Address:

FEI Number: 59-2070707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILTON GRAND VACATIONS COMPANY, LLC
6355 METROWEST BLVD
SUITE 180
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: LOOMIS, LAURA
Address: 7736 TAMARACK LANE
City-St-Zip: ONTARIO, NY

Title: PD () Delete
Name: SHARP, JOHN
Address: 6734 FALCON RIDGE
City-St-Zip: INDIANAPOLIS, IN

Title: VD () Delete
Name: BROWN, S. DEAN
Address: 7757 REDCOACH DRIVE
City-St-Zip: INDIANAPOLIS, IN 46250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BROWN, S. DEAN
Address: 7757 REDCOACH DRIVE
City-St-Zip: INDIANAPOLIS, IN 46250

Title: VD (X) Change () Addition
Name: SHARP, JOHN B
Address: 6734 FALCON RIDGE
City-St-Zip: INDIANAPOLIS, IN 46278

Title: STD (X) Change () Addition
Name: DEVAUGHN, HANS
Address: 5014 SHORELINE CIRCLE
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: S. DEAN BROWN

P

03/27/2009

Electronic Signature of Signing Officer or Director

Date