2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2009
Secretary of State

DOCUMENT# 754924

Entity Name: ORLANDO INTERNATIONAL RESORT CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5353 DEL VERDE WAY
ORLANDO, FL 32819 US

New Principal Place of Business:

Current Mailing Address:

5353 DEL VERDE WAY
ORLANDO, FL 32819

New Mailing Address:

5353 DEL VERDE WAY
ORLANDO, FL 32819 US

FEI Number: 59-2062126 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BLVD.
1600 MIAMI CENTER
MIAMI, FL 33131 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: T ( ) Delete
Name: FOX, WILBERT
Address: 5353 DEL VERDE WAY
City-St-Zip: ORLANDO, FL 32819

Title: PD ( ) Delete
Name: BAUDOIN, LARRY
Address: 5353 DEL VERDE WAY
City-St-Zip: ORLANDO, FL 32819

Title: ST ( ) Delete
Name: HIRSCHBERG, BOB
Address: 5353 DEL VERDE WAY
City-St-Zip: ORLANDO, FL 32819

Title: 2VPD ( ) Delete
Name: CREMER, KARL
Address: 5353 DEL VERDE WAY
City-St-Zip: ORLANDO, FL 32819 CA

Title: 1VPD ( ) Delete
Name: GROVES, RICHARD
Address: 5353 DEL VERDE WAY
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FOX, WILBERT
Address: 5353 DEL VERDE WAY
City-St-Zip: ORLANDO, FL 32819

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: RUSSELL, TIMOTHY
Address: 5353 DEL VERDE WAY
City-St-Zip: ORLANDO, FL 32819

Title: VPD (X) Change ( ) Addition
Name: GROVES, RICHARD
Address: 5353 DEL VERDE WAY
City-St-Zip: ORLANDO, FL 32819

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: LARRY BAUDOIN PD 04/02/2009

Electronic Signature of Signing Officer or Director — Date