2002 UNIFORM BUSINESS REPORT (UBR)

Feb 11, 2002 8:00 am **DOCUMENT # 755715** 1. Entity Name **Secretary of State** VISTANA CONDOMINIUM ASSOCIATION, INC. 02-11-2002 90190 002 ****70 00 Mailing Address Principal Place of Business P.O. BOX 22197 13800 STATE ROAD 535 ORLANDO FL 32821 LAKE BUENA VISTA FL 32830-2197 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2045365 Not Applicable \$8.75 Additional Country Country Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. **Department of State** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. (9/01) ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME THOMAS, THORP S **CR2E037** STREET ADDRESS STREET ADDRESS 8800 VISTANA CENTRE DRIVE CITY-ST-ZIP CITY-ST-ZIE ORLANDO FL ☐ Change ☐ Addition Delete TITLE TITLE WASSERMAN, JOEL NAME STREET ADDRESS STREET ADDRESS 829 MOSELEY ROAD CITY-ST-ZIP CITY-ST-ZIP HIGHLAND PARK IL 60035 ☐ Change Addition ☐ Delete TITLE PD TITLE NAME HANOUSEK, WILLIAM NAME STREET ADDRESS STREET ADDRESS 400 EAST 67TH STREET CITY-ST-ZIP CITY-ST-7IP NEW YORK NY 10021 ☐ Change ☐ Addition ☐ Delete VPD TITLE FALATEK, FRANCIS NAME STREET ADDRESS STREET ADDRESS **6 WINDY WAY** CITY-ST-ZIP CITY-ST-ZIP SYMRNA DE 19977 ☐ Change ☐ Addition ☐ Delete TITLE SD TITLE NAME LESICK, MICHAEL NAME STREET ADDRESS STREET ADDRESS 62 HILL ROAD CITY-ST-ZIP CITY-ST-ZIP GOSHEN NY 10924 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 9

BE PREDIMENSO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/02

407.239.3019

FILED

Daytime Phone #



February 1, 2002

Florida Department of State **Division of Corporations** Annual Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

Enclosed for filing are 14 Annual Reports for the following corporations:

- Vistana Condominium Association, Inc. 1.
- 2. Vistana Falls Condominium Association, Inc.
- Vistana Spa Condominium Association, Inc. 3.
- 4. Vistana Springs Condominium Association, Inc.
- Vistana Fountains Condominium Association, Inc. 5.
- Vistana Fountains II Condominium Association, Inc. 6.
- 7. Vistana Lakes Condominium Association, Inc.
- Vistana Cascades Condominium Association, Inc. 8.
- 9. Beach Club Property Owners' Association, Inc.
- Oak Plantation Condominium Association, Inc. 10.
- Vistana Resort at World Golf Village Condominium Association, Inc. 11.
- Village North Condominium Association, Inc. 12.
- 13. Bella Florida Condominium Association, Inc.
- Villages Master Association, Inc. 14.

sú Wallace

Also enclosed are 14 checks payable to the Department of State, drawn on each company's account, in the amount of \$70 each: \$61.25 filing fee and \$8.75 Certificate of Status.

Please return the Certificate of Status for each report to my attention to the address below. If you have any questions, you can contact me at 407.465.3881.

Sincerely,

Rosie Wallace **Executive Assistant** SVO Management, Inc.

Enclosures







(M) THE LUXURY COLLECTION