2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#768946

FILED Feb 17, 2010 Secretary of State

Entity Name: VACATION INN RESORT OF THE PALM BEACHES, INC.

Current Principal Place of Business: New Principal Place of Business:

6500 NORTH MILITARY TRAIL WEST PALM BCH., FL 334071296 US

Current Mailing Address: New Mailing Address:

6500 NORTH MILITARY TRAIL WEST PALM BCH., FL 334071296 US

FEI Number: 59-2348071 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

POTERE, ROBERT F 6500 NORTH MILITARY TR, LOT 533 WEST PALM BEACH, FL 33407 US

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: PD

Name: POTERE, ROBERT

Address: 6500 NORTH MILITARY TRAIL #533 City-St-Zip: WEST PALM BCH., FL 334071296 US

Title: TD

Name: PAGNEULO, PAUL

Address: 6500 NORTH MILITARY TRAIL #563 City-St-Zip: WEST PALM BCH., FL 334071296 US

Title: SD

Name: VAN NORMAN, PAMELA

Address: 6500 NORTH MILITARY TRAIL #445 City-St-Zip: WEST PALM BCH., FL 334071296 US

Title: VD

Name: LUCKE, MARION

Address: 6500 N MILITARY TRAIL #69
City-St-Zip: WEST PALM BEACH, FL 33407

Title: [

 Name:
 SHUFF, CHARLES

 Address:
 6500 N. MILITARY TR.,258

 City-St-Zip:
 WEST PALM BEACH, FL 33407

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT F. POTERE PD 02/17/2010