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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 841028

(4)

Mailing Address

AFFINITY ROAD AND TRAVEL CLUB, INC.

## FILED Apr 23 1998 8:00am Secretary of State



84 INERNESS DRIVE EAST ENGLEWOOD CO 80112 US		64 INERNESS DRIVE EAST ENGLEWOOD CO 80112 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  07/10/1978		
	lace of Business	2a. Mailing Address 26 2575 VISTA	DEL MI	a no	4, FEI Number		optied For
Suite, Apt.	# alo	26 63 13 1171A Suite, Apt. #, etc.	VEL III	il NL			ot Applicable
22	#, <del>0</del> (0.	27			5. Certificate of Status Desired		Additional equired
23 City & State			CA		6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip 24	Country 25	29 Zip 93001	Count		8. This corporation owes or has paid the curre Personal Property Tax due June 30.		tangible ☑ No
	g. Name and Address of Current	Registered Agent			10. Name and Address of New Registered A	gent	
CT	CORPORATION SYSTEM		8	I Name			
1200 S. PINE ISLAND ROAD				Street	Address (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324			8	3			
			8	City	FL	<b>85 Z</b> ip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the abo	ve-named	corporation submits this statement for the purpose of	hanging i	ts registered
office or r agent. I a	registered agent, or both, in the State c im familiar with, and accept the obligat	it Florida. Such change was i ions of, Section 607.0505, Fl	autnorizea i orida Statut	oy the corp es.	poration's board of directors. I hereby accept the appo	ınımenı as	registerea
SIGNATURE							
	Signature typed or printed name of registered agent			gent signature	required when reinstating) DATE	DIOCOTOL	20.01.40
12. TITLE	OFFICERS AND	DELETE	13. 1.1 TOLE		ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition
NAME	ADAMS, STEPHEN	C DECEM	1.2 NAM		•	Unungo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS	64 INVERNESS DRIVE EAST			et address			:
CITY-ST-ZIP	ENGLEWOOD CO 80112		1.4 C(TY			_	
TITLE	P	DELETE	2.1 TITLE		P	Change	☐ Addition
NAME	BLOCK, DAVID		22 NAM		DOWIS, MARK C. 64 INVERNESS DRIVE EAS ENGLEWOOD, CO 80112		
STREET ADDRESS	64 INVERNESS DRIVE EAST		23 STRE	T ADDRESS	64 INVERNESS DRIVE EAS	7	
CITY ST-ZIP	ENGLEWOOD CO 80112		2. 4 CITY	- ST - ZIP	ENGLEWOOD, CO 80112		
TITLE	VT	☐ DELETE	31 TITLE			Change	Addition
NAME	BOGGESS, MARK		3.2 NAM				
STREET ADDRESS	64 INVERNESS DRIVE EAST		33 STRE	ET ADDRESS			
CITY-ST-ZIP	ENCGLEWOOD CO	T prieze	3 4. CITY			10	T AARC
TITLE	8	☐ DELETE	4 1 THTLE		<u>_</u>	Change	Addition
NAME	MAYER, NANCY E 64 INVERNESS DRIVE EAST		4 2 NAM	-			
STREET ADDRESS	ENGLEWOOD CO 80112			ET ADDRESS			
CITY-ST-ZIP TITLE	ENTOCLINOOD OU OUT IZ	☐ DELE <b>TE</b>	4.4 CITY			Change	Addition
NAME			52 NAM		,		- Addition
STREET ADDRESS				Et address			
CITY-ST-ZIP			54 CITY				
TITLE		DELETE	6 I TITLE			Change	☐ Addition
NAME			6.2 NAM				
STREET ADDRESS			6.3 STRE	ET ADDRESS			
CITY-ST-ZIP			6.4 CITY	ST-ZIP			

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 annual proof of the supplemental annual proof 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 footporation or the receiver or displace 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, or on an attachment with an address.

1 22 00 805-1174