2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B96000000018

1. Entity Name

RMI-ROYAL PALM C.V.O.A., A NETHERLANDS ANTILLES

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -2 PM 1:33

Principal Place of Business	Mailing Address
1781 PARK CENTER DRIVE	1781 PARK CENTER DRIVE
ORLANDO FL 32835	ORLANDO FL 32835-6210

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3359491 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM	Name
1200 SOUTH PINE ISLAND ROAD	Street Address (P.O. Box Number is Not Acceptable)
PLANTATION FL 33324	City FL Zip Code

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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. $0.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	F95000003469	STREET ADDRESS	1781 Park Center Drive
NAME	AKGI-SINT MAARTEN N.V.	CITY-ST-ZIP	Orlando, FL 32835
STREET ADDRESS	52 BUSH ROAD		
CITY-ST-ZIP	PHILIPSBURG,ST. MAARTEN,N.A.		
DOCUMENT #		STREET ADDRESS	
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14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Thomas A. Bell — 4/28/00 — (407) 532-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

mkl Thomas A. Bell, secretary of AKGI-Sint Maarten, N.V., the general partner