2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007572

Entity Name: VACATION INTERNATIONALE INC

FILED Jan 14, 2009 Secretary of State

Entity Nar	ne: VACATIOI	N INTERNATIONALE, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	H AVENUE NE E, WA 98004				
Current Mailing Address:			New Mailing Address:		
	H AVENUE NE E, WA 98004				
FEI Number:	91-1600565	FEI Number Applied For ()	FEI Number Not Appl	licable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
1203 GOV TALLAHAS The above	SSEE, FL 3230	ARE BLVD., SUITE 101 12960 US	ırpose of changing i	its registered office or registered agent, or both,	
SIGNATUR					
	Electroni	c Signature of Registered Ager	nt	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS	S AND DIRECT	ORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PRES () FLAD, BETTY 1400 SW WOOL PORTLAND, OR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () CONRAD, JOE 5538 SOUTH BA BOISE, ID 8371		Title: Name: Address: City-St-Zip:	SEC (X) Change () Addition CONRAD, JOE 5538 SOUTH BASALT AVENUE BOISE, ID 83716	
Title: Name: Address: City-St-Zip:	SEC () BATEMAN, LAUF 15312 14TH PLA LYNNWOOD, W	ACE WEST	Title: Name: Address: City-St-Zip:	TREA (X) Change () Addition BATEMAN, LAURIS 15312 14TH PLACE WEST LYNNWOOD, WA 98087	
Title: Name: Address: City-St-Zip:	VP () ESTEP, LANDOI 1300 170TH PLA BELLEVUE, WA	ACE NE	Title: Name: Address: City-St-Zip:	ASSI (X) Change () Addition ESTEP, LANDON R 1300 170TH PLACE NE BELLEVUE, WA 98008	
Title: Name: Address: City-St-Zip:	VP () ALLEN, STUART 2102 12TH AVE. SEATTLE, WAS	EAST	Title: Name: Address: City-St-Zip:	GM (X) Change () Addition ALLEN, STUART C 2102 12TH AVE. EAST SEATTLE, WA 98102	

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

SIGNATURE: JOHN M. ARTHUR COUN 01/14/2009