

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000005139

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** FESTIVA RESORTS ADVENTURE CLUB MEMBERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

ONE VANCE GAP ROAD  
ASHEVILLE, NC 28805

**New Principal Place of Business:**

**Current Mailing Address:**

ONE VANCE GAP ROAD  
ASHEVILLE, NC 28805

**New Mailing Address:**

**FEI Number:** 20-5241330

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR., SUITE 4  
WESTON, FL 33331 US

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

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: D  
Name: CLAYTON, DONALD K  
Address: 623 UPPER SONDLEY  
City-St-Zip: ASHEVILLE, NC 28803

Title: D  
Name: PATRICK, HERBERT H JR.  
Address: 306 VANDERBILT ROAD  
City-St-Zip: ASHEVILLE, NC 28803

Title: PD  
Name: WEAS, TOBIAS A  
Address: 369 SCARLET TANAGER CT  
City-St-Zip: ARDEN, NC 28704

Title: VD  
Name: HORTON, WILL  
Address: 21 MARLBOROUGH DRIVE  
City-St-Zip: ASHEVILLE, NC 28805

Title: STD  
Name: SMITH, YVETTE S  
Address: 131 N. TURKEY CREEK ROAD  
City-St-Zip: LEICESTER, NC 28748

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: TOBIAS A. WEAS

PRES

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date