

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F53982

FILED
Mar 10, 2006
Secretary of State

Entity Name: ORLANDO TIME-SHARING, INC.

Current Principal Place of Business:

595 W. GRANADA BLVD
SUITE A
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

595 W. GRANDE BLVD.
SUITE A
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 59-2124105 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWEET, JEFFREY C
595 W. GRANADA BLVD
SUITE A
ORMOND BEACH, FL 32174 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: WHITE, O.L.,
Address: 3555 S. ATLANTIC AVE.
City-St-Zip: DAYTONA BCH SHRS, FL

Title: DP () Delete
Name: VERKAIK, ROBERT,
Address: 2777 POINCIANNA BLVD.
City-St-Zip: KISSIMMEE, FL 34746

Title: ST () Delete
Name: ZOCH, LORI
Address: 595 W. GRANDE BLVD, SUITE A
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: VERKAIK, ROBERT
Address: 2777 POINCIANNA BLVD.
City-St-Zip: KISSIMMEE, FL 34746

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT VERKAIK

D/P

03/10/2006

Electronic Signature of Signing Officer or Director

_____ Date