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Secretary of State

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Mailing Address

595 W GRANADA BLVD

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F57661

Principal Place of Business 595 W GRANADA BLVD

ORLANDO TIME-SHARING II, INC.

SUITE A SHITE A DO NOT WRITE IN THIS SPACE ORMOND BEACH FL 32174 ORMOND BEACH FL 32174 3. Date Incorporated or Qualifed 12/07/1981 2. Principal Place of Business Applied For 2a. Mailing Address 4. FEI Number 59-2264848 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Zip Country 8. This corporation owes the current year Intangible Zip Country □ No 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SWEET, JEFFREY C Street Address (P.O. Box Number is Not Acceptable) 595 W GRANADA BLVD SUITE A 83 ORMOND BEACH FL 32174 City Zip Code 84 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. DELETE 1.1 TITLE VD TITLE 1.2 NAME WHITE, O. L. NAME 3555 S. ATLANTIC AVE. 1.3 STREET ADDRESS STREET ADDRESS DAYTONA BCH SHRS FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change □ DELETE 2.1 TITLE DP TITLE VERKAIK, ROBERT 2.2 NAME NAME 2770 POINCIANNA BLVD. 2.3 STREET ADDRESS STREET ADDRESS KISSIMMEE FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 3.1 TITLE TITLE ZOCH, LORI 3.2 NAME NAME 595 W GRANADA BLVD, SUITE A 3.3 STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32174 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 41 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIF

5.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

TITLE

NAME

TITLE

NAME

E OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED

☐ DELETE

DELETE

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 annual report or supplemental annual report 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 corporation or the receiver or truetee empowered to execute this report as reclaired by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an articlement with an address, with all other line empowered.

Change

☐ Change

Addition

Addition

CR2E034 (11/98)