

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90113 044 ***150.00

DOCUMENT # F94000001743

1. Corporation Name

HYATT VACATION OWNERSHIP, INC.

Principal Place of Business

200 WEST MADISON STREET
41ST FLOOR
CHICAGO IL 60606

Mailing Address

200 WEST MADISON STREET
41ST FLOOR
CHICAGO IL 60606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/06/1994

4. FEI Number

36-3878044

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM INC
1201 HAYS ST
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME PRITZKER, THOMAS J
STREET ADDRESS 200 WEST MADISON STREET
CITY-ST-ZIP CHICAGO IL 60606

TITLE COBD ☐ DELETE

NAME PRITZKER, NICHOLAS J
STREET ADDRESS 200 WEST MADISON STREET
CITY-ST-ZIP CHICAGO IL 60606

TITLE VT ☐ DELETE

NAME POSNER, KENNETH R
STREET ADDRESS 200 WEST MADISON STREET
CITY-ST-ZIP CHICAGO IL

TITLE S ☐ DELETE

NAME CONNOLLY, PETER D
STREET ADDRESS 200 WEST MADISON STREET
CITY-ST-ZIP CHICAGO IL 60606

TITLE P ☐ DELETE

NAME GEOGA, DOUGLAS
STREET ADDRESS 200 WEST MADISON STREET
CITY-ST-ZIP CHICAGO IL 60606

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V ☐ Change ☒ Addition

12 NAME BURLINGAME, JOHN
13 STREET ADDRESS 200 West Madison Street
14 CITY-ST-ZIP Chicago, IL 60606

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth R. Posner, VP + Treasurer

9/2/99

Date

312-750-1234

Daytime Phone #

CR2E034 (11/98)