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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400002376 (1)

HYATT VACATION MANAGEMENT CORPORATION

**FILED** Apr 14 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address |  |                                  |   |                              |                      | <b>\</b>   |                                |   |  |
|---|--|----------------------------------|---|------------------------------|----------------------|--|--------------------------------|---|--|
| 800 WEST MADISON ST.<br>41ST FLOOR          |  | 41ST FLOOR                       | 200 WEST MADISON ST.<br>41ST FLOOR<br>CHICAGO U 80808 |                              |                      | DO NOT WRITE IN THIS SPACE   |                                |   |  |
|   |  |                                  |   |                              |                      | 3. Date Incorporated or Qualified 05/09/1994   |                                |   |  |
| 2. Principal P                              | lace of Business                                       | 26. Mailing Address              |   |                              |                      | 4. FEI Number<br>36-3950778  | <b></b>                        | Applied For<br>Not Applicable           |  |
| Suite, Apt.                                 | #, etc.  | Suite, Apt. #, etc.              | Suile, Apt. #, etc.                                   |                              |                      | 5. Certificate of Status Desired   | \$8.75 Additional Fee Required |   |  |
| City & State                                | θ  | City & State                     | City & State  |                              |                      | 6. Election Campaign Financing Trust Fund Contribution   | \$5.00 May Be<br>Added to Fees |   |  |
| Zip Country                                 |  | Zip                              | l — — — — — — — — — — — — — — — — — — —               |                              |                      | 8. This corporation owes or has paid the current year Intangible   |                                |   |  |
| 24  | 25 29  9. Name and Address of Current Registered Agent |                                  | 30  |                              |                      | Personal Property Tax due June 30.  10. Name and Address of New Registe  |                                | □ No                                    |  |
| TH  | E PRENTICE HALL CORPORATE                              |                                  | 8   | 31                           | Name                 | IV. Name and Address of New Hagisto  | GR ABOUT                       |   |  |
| 1201 HAYES ST                               |  |                                  | 8   | 12                           | Street Addre         | dress (P.O. Box Number is Not Acceptable)  |                                |   |  |
| SUITE 105 TALLAHASSEE FL 32301              |  |                                  | 8   | 13                           |                      | · · · · · · · · · · · · · · · · · · ·  |                                |   |  |
| INLLATIONEE PL 92001                        |  |                                  |   |                              | City                 |  |                                | o Cado                                  |  |
|   |  |                                  | - 1   | 4                            | City                 |  |                                | p Code                                  |  |
| agent. I a<br>SIGNATURE                     | Signature, typed or printed harne of regularied ap     |                                  |   |                              | nt signature require | oration submits this statement for the purpoon's board of directors. I hereby accept the dwhen reinslating)  ADDITIONS/CHANGES TO OFFICERS | TE .                           | * |  |
| TITLE                                       | D  | DELETE                           |   | 1.1 TITLE                    |                      | ADDITIONO/ONANGES TO GITTOETIS   | Change                         |   |  |
| NAME  | PRITZKER, THOMAS J                                     |                                  | 1,2 NAM   | Æ                            | )                    |  |                                |   |  |
| STREET ADDRESS                              | 200 W. MADISON<br>CHICAGO IL 60606                     |                                  |   |                              | ADDRESS              |  |                                |   |  |
| CITY-ST-ZIP<br>TITLE                        | DV DELETE  |                                  |   | 1.4 City-St-ZiP<br>2.1 Title |                      |  | Change                         | Addition                                |  |
| NAME  | HANDELSMAN, HAROLD S                                   | C) preside                       | 2.7 THEE  |                              |                      |  | onlings                        | , L ribation                            |  |
| STREET ADDRESS                              | 200 W. MADISON   |                                  | 2.3 STRE  |                              | ADDRESS              |  |                                |   |  |
| CTTY-ST-ZIP                                 | CHICAGO IL 60606                                       |                                  |   | 2. 4 CITY - ST - ZIP         |                      |  |                                |   |  |
| TITLE                                       | CD<br>PRITZKER, NICHOLAS J                             | ☐ DELETE                         | 3.1 TITLE   |                              |                      |  | ☐ Change                       | Addition                                |  |
| NAME<br>STREET ADDRESS                      | 200 W. MADISON   |                                  | 3.2 NAM<br>3.3 STRE                                   |                              | ADDRESS              |  |                                |   |  |
| CITY-ST-ZIP                                 | CHICAGO IL 60606                                       |                                  | 3.4. CITY   |                              | I .                  |  |                                |   |  |
| TITLE                                       | S DELETE 4.1   |                                  | 4.1 TITLE   |                              | ·                    |  | Change                         | Addition                                |  |
| NAME  | CONNOLLY, PETER D                                      |                                  | 4. 2 NAM  | 4. 2 NAME                    |                      |  |                                |   |  |
| STREET ADDRESS                              | 200 W. MADISON<br>CHICAGO IL 60606                     |                                  |   |                              | ADDRESS              |  |                                |   |  |
| CITY-ST-ZIP<br>TITLE                        | VT VI  | DELETE                           |   | 4.4 CITY-ST-ZIP<br>5.1 TITLE |                      |  | Change                         | Addition                                |  |
| NAME  | Posner, Kenneth R                                      | _ otali                          | 5.7 MAM   |                              | \                    |  | 0go                            |   |  |
| STREET ADDRESS                              | 200 W. MADISON   |                                  | 5.3 STRE  |                              | ADORESS              |  |                                |   |  |
| CITY-ST-ZIP                                 | CHICAGO IL   |                                  | 5.4 CITY  | -ST                          | r-ZIP                |  |                                |   |  |
| TITLE                                       | P DOUGLAS  | DELETE                           | 6.1 TITLE   |                              |                      |  | Change                         | Addition                                |  |
| NAME  | GEOGA, DOUGLAS<br>200 W. MADISON                       |                                  | 6.2 NAMI  |                              | (                    |  |                                |   |  |
| STREET ADDRESS                              | ZUU W. MADISUN<br>CHICAGO IL                           |                                  |   |                              | ADDRESS              |  |                                |   |  |
| CITY-ST-ZIP                                 | <del></del>  | with this films does not qualify | for the exem  |                              |                      | Section 119 07(3)(i) Florida Statutes I furthe   | er certify that th             | ne information                          |  |

indicated on this annual report or supplied with this ming does not quality for the exemption stated in Section 119.07(5)(f), Florida Statutes. Hutther certify that the indicated on this annual report or supplied enter an 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

2/19/44

312-750-1234