


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

FILED  
Feb 09 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000003800 (7)

1. Corporation Name  
SIGNATURE RESORTS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 12010 TURTLE CAY OR ORLANDO FL 32835	Mailing Address 12010 TURTLE CAY OR ORLANDO FL 32835
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2. Principal Place of Business 21 1781 Park Center Dr. Suite, Apt. #, etc. 22 City & State 23 Orlando, FL 24 Zip 32835 Country USA		2a. Mailing Address 26 1781 Park Center Dr. Suite, Apt. #, etc. 27 City & State 28 Orlando, FL 29 Zip 32835 Country USA		3. Date Incorporated or Qualified 07/26/1996	
4. FEI Number 95-4582157		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent DIROCCO, ANNA M 12010 TURTLE CAY OR ORLANDO FL 32835		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 1781 Park Center Dr. 83 84 City Orlando FL 85 Zip Code 32835	
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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 Anna M. DiRocco  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 1/14/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KANEKO, OSAMU	1.2 NAME	
STREET ADDRESS	5933 W CENTURY BLVD SUITE 210	1.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GESSOW, ANDREW J	2.2 NAME	
STREET ADDRESS	2934 WOODSIDE RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WOODSIDE CA	2.4 CITY-ST-ZIP	
TITLE	DS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KENNINGER, STEVEN	3.2 NAME	
STREET ADDRESS	5933 W CENTURY BLVD SUITE 210	3.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	3.4 CITY-ST-ZIP	
TITLE	SVP	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GIANNONI, GENEVIEVE	4.2 NAME	
STREET ADDRESS	12010 TURTLE CAY OR	4.3 STREET ADDRESS	1781 Park Center Dr.
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP	Orlando, FL 32835
TITLE	SVP	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FREY, CHARLES C	5.2 NAME	
STREET ADDRESS	12010 TURTLE CAY OR	5.3 STREET ADDRESS	1781 Park Center Dr.
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP	Orlando, FL 32835
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	Executive Vice President
STREET ADDRESS		6.3 STREET ADDRESS	Noyes, James E.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	616 Enterprise Dr., Suite 200 Oak Brook, IL 60521

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.

SIGNATURE:  1/14/98 (407) 532-1000

CR2E034 (10/97)