DOCUMENT # F96475 1. Entity Name VACATION RESORTS OF AMERICA, INC.						FIGED	and the second s	-te
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Principal Place	e of Business		Mailing Address		SE	CRETART OF S	TATE	•
11216 TAMIAMI TR. N.			11216 TAMIAMI TR. N.		TAI	LLAHASSEE, FL	IGRIDA	
STE, 110 Naples FL 34110			STE. 110 NAPLES FL 34110					
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address		9			
			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
6: 0.0:			City & State		4. FEI Number	F0 0040004	Ap	plied For
City & State	e		City & State	<u></u>		59-2340084	<u> </u>	t Applicat
-Zip-	Country =		Zip	Country	5. Certificate o	f Status Desired	\$8.75 Add Fee Require	
	6. Name and Addre	eas of Current Re	egistered Agent		7. Name and A	ddress of New Regist	ered Agent	
				Name				
	, EDWARD			Street Add	dress (P.O. Box Number	is Not Acceptable)		
1121 STE.	6 Tamiami TR. N. 110							
	LES FL 34110			City			FL Zip Code	e
		<u> </u>	he purpose of changing it				<u> </u>	
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IGNATURE ,	Signature, typed or printed name	e of registered agent and	tritle if applicable. (NO	TE: Registered Agent signature	required when rainstating)		DATE	
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