DOCUMENT # F98000002666

1. Entity Name

SUNTERRA TRAVEL, INC.

FILED

00 AUG -4 AM 7:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

AMENDMENT

Principal Place of Business	Mailing Address
116TH AVE WA 98004	1781 PARK CENTER DR. ORLANDO FL 32835-6210

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	6177 Lake Ellenor Dr. Suite, Apt. #, etc.
City & State	City & State: Orlando, FL
Zip / Country	Zip: 32809 / Country: US

4. FEI Number: 91-1074355 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

City FL Zip Code

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

[redacted]

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
	DP THELEN, ANDREW J 1417 116TH AVE. BELLEVUE WA 98004 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D Charles C. Frey 6177 Lake Ellenor Dr. Orlando, FL 32809 ☐ Change ☒ Addition
	DVT SKRABY, THOMAS A 1417 116TH AVE. BELLEVUE WA 98004 X Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Stephen M. Richmond 6177 Lake Ellenor Dr. Orlando, FL 32809 ☐ Change ☒ Addition
	V FREY, CHARLES C 1781 PARK CENTER DR. ORLANDO FL 32835 X Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Keith J. Brown 6177 Lake Ellenor Dr. Orlando, FL 32809 ☐ Change ☒ Addition
	S ESTEP, LANDON 1417 116TH AVE. BELLEVUE WA 98004 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D T. Lincoln Morison 6177 Lake Ellenor Dr. Orlando, FL 32809 ☐ Change ☒ Addition
	800003384068 ☐ Delete -09/06/00--01095--003 ***1347.50 *****61.25	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D. Thomas J. Gispanski 6177 Lake Ellenor Dr. Orlando, FL 32809 ☐ Change XX Addition
	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/VP Thomas A. Skraby 1417 116th Ave. Bellevue, WA 98004 ☐ Change ☒ Addition

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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stephen M. Richmond 532-1350

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (407) 532-1000 Daytime Phone #

010726

CR2E034 (9/99)