## **2001 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** May 03, 2001 8:00 am Secretary of State DOCUMENT # **F98000002666** 1. Entity Name SUNTERRA TRAVEL, INC. 05-03-2001 90478 001 \*2,611.25 Principal Place of Business Mailing Address 1417 116TH AVE .6177\_LAKE-ELLENOR-DR. BELLEVUE WA 98004 ORLANDO FL 32009 2. Principal Place of Business 3. Mailing Address 1781 Park Center Dr. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 91-1074355 Orlando, FLNot Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 32835 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 8. 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change X Addition X Delete TITLE TITLE MORISON, T. LINCOLN NAME Gregory F. Rayburn 1781 Park Center Dr. NAME STREET ADDRESS STREET ADDRESS 6177 LAKE ELLENOR DR. CITY-ST-ZIP CITY-ST-ZIP Orlando, FL 32835 ORLANDO FL 32809 ☐ Change X Addition X Delete TITLE TITLE Lawrence E. Young NAME NAME FREY, CHARLES C 1781 Park Center Dr. STREET ADDRESS STREET ADDRESS 6177 LAKE ELLENOR DR. Orlando, FL 32835 CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32809 ☐ Change X Addition X Delete TITLE TITLE NAME Landon R. Estep RICHMOND, STEPHEN M NAME STREET ADDRESS STREET ADDRESS 1781 Park Center Dr. 6177 LAKE ELLENOR DR. CITY-ST-ZIP CITY-ST-7IP ORLANDO FL 32809 Orlando, FL 32835 X Delete X Addition ☐ Change TITLE TITLE AT NAME BROWN, KEITH J NAME Eric P. Butte STREET ADDRESS STREET ADDRESS 6177 LAKE ELLENOR DR. 1781 Park Center Dr. CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32809 Orlando, FL 32835

**BELLEVUE WA 98004** In this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 powerpol to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied indicated on this report or supplemental run of the corporation or the receiver or truste en changed or on an attachment with the David C. Johnston other like empowered.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

X Delete

X Delete

SIGNATURE:

GISPANSKI, THOMAS J

ORLANDO FL 32809

SKRABY, THOMAS A

1417 116TH AVE

6177 LAKE ELLENOR DR.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David C. Johnston

Orlando, FL 32835

1781 Park Center Dr.

☐ Change

☐ Change

X Addition

X Addition

CR2E034 (10/00)