FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # H62220 (9)MARRIOTT RESORTS TITLE COMPANY, INC. Principal Place of Business Mailing Address 10400 FERNWOOD ROAD 10400 FERNWOOD ROAD **DEPT. 924.13** DEPT. 924.13 BETHESDA MD 20817 DO NOT WRITE IN THIS SPACE BETHESDA MD 20817 US 3. Date Incorporated or Qualified 06/17/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 59-2574155 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zio Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PRENTICE-HALL CORPORATION SYSTEM, INC. Name 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) SUITE 105 83 TALLAHASSEE FL 32301 84 City 85 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 (NOTE: Registered Agent signature required when reinstating) 12, ÖFFICERS AND DIRECTORS 13. DELETE TITLE

Feb 10 1998 8:00am Secretary of State



Applied For

Zip Code

Not Applicable

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition NAME COTNEY, BETH P. 1.2 NAME 10400 FERNWOOD RD STREET ADDRESS 1.3 STREET ADDRESS BETHESDA MD CITY-ST-ZIP 14 CITY-ST-ZIP DELETE TITLE AS Change Addition NAME BENZ, NANCY L. 22 NAME 10400 FERNWOOD ROAD STREET ADDRESS 23 STREET ADDRESS BETHESDA MO CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITS F 31 TITLE ☐ Change ___ Addition KIMBALL, KEVIN M. NAME 3 2 NAME 10400 FERNWOOD ROAD STREET ADDRESS 3 3 STREET ADDRESS BETHESDA MD CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 31TLE Change Addition Jeff B. Stant SHAW, WILLIAM J NAME 4 2 NAME 10400 Fernisad Rd. 10400 FERNWOOD ROAD STREET ADDRESS 4.3 STREET ADDRESS BETHESDA MD Bethesda Mo 2061M CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Addition SCALO, JOSEPH F. NAME 5.2 NAME 10400 FERNWOOD RD STREET ADDRESS 5 3 STREET ADDRESS BETHESDA MD CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME MURPHY, RAYMOND G 6.2 NAME STREET ADDRESS 10400 FERNWOOD RD 6.3 STREET ADDRESS BETHESDA MD CITY-ST-ZIP 64 CITY-ST-7IP

14. Thereby 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 suppliemental 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