

**2002 UNIFORM BUSINESS REPORT (UBR)****FILED**  
**Aug 12, 2002 8:00 am**  
**Secretary of State**

08-12-2002 90003 021 \*\*\*550.00

**DOCUMENT # H62220**1. Entity Name  
**MARRIOTT RESORTS TITLE COMPANY, INC.**

Principal Place of Business

**10400 FERNWOOD ROAD  
DEPT. 924.13  
BETHESDA MD 20817  
US**

Mailing Address

**10400 FERNWOOD ROAD  
DEPT. 924.13  
BETHESDA MD 20817  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **59-2574155**

Applied For

Not Applicable

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

## 6. Name and Address of Current Registered Agent

**PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301**

## 7. Name and Address of New Registered Agent

Name

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

City

**FL**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P	WEISZ, STEPHEN P	10400 FERNWOOD ROAD	BETHESDA MD 20817	<input type="checkbox"/>
AS	BENZ, NANCY L.	10400 FERNWOOD ROAD	BETHESDA MD	<input type="checkbox"/>
V	PULSE, M L JR	10400 FERNWOOD ROAD	BETHESDA MD 20817	<input type="checkbox"/>
D	COTNEY, BETH P	10400 FERNWOOD ROAD	BETHESDA MD 20817	<input checked="" type="checkbox"/>
S	SCALO, JOSEPH F.	10400 FERNWOOD RD	BETHESDA MD 20817	<input type="checkbox"/>
T	HANDLON, CAROLYN B	10400 FERNWOOD RD	BETHESDA MD 20817	<input type="checkbox"/>

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
D	KEVIN M. KIMBALL	10400 FERNWOOD ROAD	BETHESDA, MD. 20817	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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:

**Handwritten Signature**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**8/1/02**

(301) 380-8742

Daytime Phone #

CR2E034 (4/02)