FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # INTERVAL REALTY GROUP, INC.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(3)

FILED May 08 1998 8:00am Secretary of State

Principal Place of Business Mailing Address								-	1 00 0 0 0 0 0 0 0 0	ABII BIHAH DIL	JAL QUENT QUBEN QUA	HI 0 4011 1001	
3800 SO. OCEAN DRIVE STE. 235				3800 SO. OCEAN DRIVE STE, 235									
HOLLYWOOD FL 33019				HOLLYWOOD FL 33019					DO NOT WRITE IN THIS SPACE				
								3.	Date Incorporated or Qualified		DI AUL		
									05/24/1989			i	
2. Principal Place of Business				2a. Mailing Address					FEI Number		Ar	oplied For	
21				26					65 - 0110431	··		ot Applicable	
Suite, Apt. #, etc.			\vdash	Suite, Apt. #, etc.				5.	Certificate of Status Desired		T	Additional	
City & State			27	City & State				+_	Electron Accounts Proceeding		•	equired	
23			28	28				6.	Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip		Country	120,	Zip Country				8.	This corporation owes or has p				
24	ì	25	29	30				Personal Property Tax due June 30. Yes No					
		and Address of Current	Regis	stered Agent				10.	Name and Address of New R	egistered	Agent		
	APELL, JOE					81	Name						
3800 S OCEAN DRIVE						82 Street Address (P.O. Box Number is Not Acceptable)							
SUITE 235				8									
HOLLYWOOD FL 33019						83							
						84	City			FL	85 Zip	Code	
11. Pursuant to the provisions of Soctions 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													
SIGNATURE Signature, typed or printed name of registered agent and title diapplicable (NOTE: Registered Agent signature required when reinstating) DATE													
12.	Organism () ()	OFFICERS AND			13.				ADDITIONS/CHANGES TO OFF		D DIRECTOR	RS IN 12	
TITLE	7			DELETE	1.1 101	LE					Change	Addition	
NAME				1.2 N			ME						
STREET ADDRES				1.3 STR			ADDRESS						
CITY-ST-ZIP		WOOD FL 33019			1.4 Ci		T - ZIP						
TITLE	VP PADME	TT DOCE		☐ DELETE	2.1 Til						Change	Addition	
NAME	BARNETT, ROSE 3800 S OCEAN DRIVE #235					2.2 NAME							
STREET ADDRES	HOLLYMOOD EL 22010					2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP							
CITY-ST-ZIP	8			DELETE	3.1 Tri		51 - 217				Change	☐ Addition	
NAME	APELL.	DOROTHY			3.2 NA								
STREET ADDRES	2000	OCEAN DRIVE #235					ADDRESS						
CITY-ST-ZIP		WOOD FL 33019			3.4. CI	IY-S	ST-ZIP						
TITLE	DTVP			☐ DELETE	4.1 Tt1	LE					Change	Addition	
NAME		YN, OWEN			4. 2 N	AME							
STREET ADDRES		OCEAN DRIVE #235			4.3 ST	reet	ADDRESS						
CITY-ST-ZIP	HOLLY	WOOD FL		25.5	4.4 CI		T-ZIP						
TITLE				☐ DELETE	5.1 Ti1						∐ Change	Addition	
NAME	.				5.2 NA		4D005500						
STREET ADDRES	88						ADDRESS]	
CITY-ST-ZIP				DELETE	5.4 C() 6.1 T()		ı-zir				Change	Addition	
NAME					6.2 NA								
STREET ADDRES	is						ADDRESS						
CITY-ST-ZIP	-				6.4 Cf								
14. I hereb	y certify that th	e information supplied wi	th this	filing does not qualify	for the exe	mpt	tion stated in	Sectio	n 119.07(3)(i), Florida Statutes.	I further o	ertify that the	information	
officer of Block 1	ed on this annu or director of th I2 or Blo ck 13 i	iai report or supplementa le corporation or the rece f changed or in an attac	i annua iver or chment	ir report is true and ac trustee empowered to withten address	execute t	i ina his r	at my signatul report as requ	re shal uired b	Il have the same legal effect as y Chapter 607, Florida Statutes	ii made u ; and that	my name ap	autam an pearsin	