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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K90619

1. Corporation Name

INTERVAL REALTY GROUP, INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90196 023 ***150.00



						1					
Principal F lace	e of Business	Mailing Address				 "		(B1) #11(1) B	.A. 4(11)		Fr: 31511 TEI
3800 SO. CCEAN DRIVE STE. 235 3800 SO. OCEAN DRIVE STE. 235						İ					
HOLLYWOOD F		HOLLYWOOD FL 33019				DO NOT W	NAC 181 THE	CDACE			
							. ,	RITE IN THIS	SPACE	<u> </u>	
						05/24	scorporated or Qualife 1/1989	a 			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number				Ap	lied For
21		26			65-01	10431			No:	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			E Contife ato of Status Desired			75 A	dditional uired		
City & State	e	City & State				6. Election	n Campaign Financing		\$5	.00	May Be
23						Trust Fund Contribution			Ad	ded to	Fees
Zip	Cou itry	Zip	Cour	Country		8. This corporation owes the current year Intar					
24	25	29	30			Perso nal Property Tax.			☐ Yes	·!	No
	9. Name and Address of Curren	Registered Agent				10. Name	and Address of New	Registered	Agent		
a nm	1 105		ļ	81	Name						
APELL, JOE 3800 S OCEAN DRIVE				82 Street A Idress (P.O. Bo (Number is Not Acceptable)				otable)			
SUITE 235				83							
	LYWOOD FL 33019										
1100	LIWOOD I L 00013			84	City			FL	85	Zip C	ode
44 Dureuant	to the provisions of Sections 607.050	and 607 1508 Florida Statu	tes, the ab	l	-named con	poration submi	ts this statement for th	e nurnose of	changir	ng its	egistered
office or r	egistered agent, or both, in the State of manifer with, and accept the obligat	of Florida. Such change was a	authonzed	by t	the corporat	ion's board of	directors. I hereby acc	ept the appoi	ntment	as reg	istered
SIGNATURE											l
SIGNATURE	Signature, typed or printed no me of registered agen	and title if applicable. (NOT	E: Registered	Agent	t signature requir	ed when reinstaling		DATE			
12.	OFFICERS AN		13.			ADDITE	ONS/CHANGES TO C	FFICERS AN			
TITLE	P	☐ DELETE	1.1 TIT	LE					☐ Cha	ange	☐ Addition
NAME	APELL, LISA		1.2 NA	ME							
STREET ADDRI SS	3800 S OCEAN DRIVE #235		1.3 STI	REET	ADDRESS						Ì
CITY-ST-ZIP	HOLLYWOOD FL 33019		1.4 CIT	Y-ST	- ZIP						
TITLE	VP	☐ DELETE	2.1 TIT	LE					Cha	ange	☐ Addition
NAME	BARNETT, ROSE		2.2 NA	ME							
STREET ADDRESS	3800 S OCEAN DRIVE #235		2.3 ST	REET	ADDRESS						1
CITY-ST-ZIP	HOLLYWOOD FL 33019		2. 4 CI	TY-SI	T- ZIP						
TITLE	S	☐ DELETE	3.1 TIT	LE					Cha	ange	☐ Addition
NAME	APELL, DOROTHY		3.2 NA	ME							
STREET ADDRESS	3800 S OCEAN DRIVE #235		3 3 ST	REET	ADDRESS						1
CITY-ST-ZIP	HOLLYWOOD FL 33019		3.4. CI	TY-\$1	T-ZIP						
TITLE	DTVP	☐ DELETE	4.1 TIT	ιE					Ch:	ange	☐ Addition
NAME	GOLDWYN, OWEN		4. 2 NA	ME							
STREET ADDRESS	ASSO A COPAN DONE HOOF		4.3 STREE		ADDRESS						}
CITY-ST-ZIP	HOLLYWOOD FL		4.4 C∏	Y-ST	r-ziP						
TITLE		☐ DELETE	5.1 TIT						☐ Chi	ange	Addition
NAME			52 NA	ME							i
STREET ADORESS			5.3 \$17	REET	ADDRESS						\
CITY-ST-ZIF			5.4 CIT	Y-ST	r-zip						
TITLE		☐ DELETE	6.1 TII	LE					☐ Cha	ange	Addition
NAME			6.2 NA	ME							
STREET ADDRESS			6.3 ST	REET	ADDRESS						- [
CITY-ST-ZIP			6.4 Cf	Y-51	r-zip						
UIII-31-21	I .										

14. I heret y certify that the informa ion 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 supplemental 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 13 if changer an artist ment with an address, with all other like processor.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE TOR DIRECTOR

9544510606 Daytime Phone #

CR2E034 (11/