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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L06680

(7)

VENTURA RESORT RENTALS, INC.

FILED	
May 14 1997 8	3:00am
Secretary of	State

Principal Place of Business Mailing Address 5946 CURRY FORD 200 SOUTH ORANGE AVENUE ORLANDO FL 32822 SUITE 2300 ORLANDO FL 52901-6440			3. Date Incorporated or Qualified 08/03/1989 04/26/1996				
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		plied For
21		26			59-2961289	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	
22		27			O. Certificate of States Desired	Fee Re	quired
City & State	e	City & State	 3		6. Election Campaign Financing	\$5.00	
23		28 Urlandon	Th		Trust Fund Contribution	Added t	
Zip 24]	Country 25	29/32801-3432	Country	y	This corporation has fiability fo Florida Statutes	ir intangible tax under s. ☐ Yes ☐ No	199.032,
241	9. Name and Address of Currer		30		10. Name and Address of New R		
10			81	Name			·
	C. CO., SOUTH ORANGE AVENUE		-				
	E 2300		82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		
	ANDO FL 32801-3432		83				
One	71100 1 6 06001 0106		84	City		85 Zip (Code
			04	City		FL S Z P \	5000
SIGNATURE	Signature, typed or printed name of registered age	ont and title if applicable (NOTE	Rog stered Aç	ont signature re	equired when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTOR	RS IN 12
TITLE	DPST	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	TAYLOR, CHERYL		1.2 NAME				
STREET ADDRESS	5946 CURRY FORD ROAD		1.3 STREE	1 ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32822	DELETE.	1.4 CITY-	ST-ZIP		Change	Addition
TITLE	DV	☐ DELETE	2.1 TITLE			Change	Noullion
NAME	TAYLOR, ALAN		2.2 NAME	1 ADDRESS			
STREET ADDRESS	5946 CURRY FORD ROAD ORLANDO FL 32822			!		•	
CITY - ST - ZIP TITLE	ONDINEO FL 32022	DELETE	2 4 GITY-ST-7IP 3 1 THLF			Change	Addition
NAME		_	3.2 NAME				
STREET ADDRESS	1		3.3 STREE	T ADDRESS			
City-ST-ZIP			3.4. Cil Y	- ST - ZIP			
TITLE		DELETE	4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAMI	:			
STREET ADDRESS			4.3 STREE	1 ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-7IP			Adabisa
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5 2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - 6.1 TITLE	-		Change	Addition
NAME		viicit	6.2 NAME	1			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			6.4 CITY-				
14 Les bars	by certify that the information supplied	ed with this filing does not qualif	fu for the ex	emption eta	ated in Section 119.07(3)(i), Florida Statu	ites. I further certify that	the
informatio	an indicated andhia annhal conact or	supplemental annual report is to x the rec eiver or trustee empow	rue and acc vered to exc	nurata ana t	that my signature shall have the same le eport as required by Chapter 607, Florida	anai ottoet as it maate lin	idet oain, idai

4/11/00

月~2、22、2770