	UNIFORM BU			R) APPRUVED AND	
DOCUI	MENT # L97	000001056		FILED	
ADVANTAGE RESORT MARKETING, L.C.				00 MAR 20 AM 9: 41;	
rincipal Place	ce of Business	Mailing Address		SECRETARY OF STATE FALLAHASSEE, FLORIDA	
1125 US HIGHWAY 98 SOUTH, STE. 200 LAKELAND FL 33801		1125 US HIGHWAY 98 SOUTH. STE. 200 LAKELAND FL 33801-5846		-13128	
. Principal P	Place of Business	3. Mailing Address			
2. Principal Place of Business		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
Suite, Apt. #, etc.					
City & State		City & State		59-3472781 Not Applicable	
Zip 	Country	Zip	Country	5. Certificate of Status Desired \$5.00 Additional Fee Required	
	6. Name and Address of Cu	rrent Registered Agent	Name	7. Name and Address of New Registered Agent	
ST. JOHN, JOSEPH P			Street	Address (P.O. Box Number is Not Acceptable)	
	HIGHWAY 98 SOUTH, STE. 2 ID FL 33801	200			
			City		
			City	FL Zip Code	
GNATURE	e named entity submits this statem		ts registered office	or registered agent, or both, in the State of Florida. Butter required when reinstating) DATE	
GNATURE		d agent and title if applicable (NC	ts registered office	or registered agent, or both, in the State of Florida. sture required when reinstating) DATE	
GNATURE _	Signature, typed or printed name of registered	d agent and title if applicable (NC	ts registered office	por registered agent, or both, in the State of Florida. ature required when reinstating) \$50.00 timent of State ADDITIONS/CHANGES	
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SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

3/17/00 863-686-1400 Daytime Phone #