

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 09, 2000 08:00 AM  
Secretary of State

DOCUMENT # M99000000807

1. Entity Name

HILTON GRAND VACATIONS DEVELOPMENT COMPANY-LAS VEGAS, LLC

Principal Place of Business

6355 METRO WEST BLVD  
SUITE 180  
ORLANDO  
32835

FL

Mailing Address

6355 METRO WEST BLVD  
SUITE 180  
ORLANDO  
32835

FL

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

58-2361323

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HARRILL DONALD L  
6355 METRO WEST BLVD  
SUITE 180  
ORLANDO  
32835

FL

7. Name and Address of New Registered Agent

Name  
DAGOT ANTOINE L

Street Address (P.O. Box Number is Not Acceptable)  
6355 METRO WEST BLVD

SUITE 180

City  
ORLANDO

FL

Zip Code  
32835

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.

SIGNATURE ANTOINE DAGOT

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

(NOTE: Registered Agent signature required when reinstating)

03/09/2000

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**

9. MANAGING MEMBERS/MEMBERS

TITLE MGR  
NAME CARRICATO DANIEL L ☐ Delete  
STREET ADDRESS 6355 METRO WEST BLVD SUITE 180  
CITY-ST-ZIP ORLANDO FL 32835

TITLE MGR  
NAME DAGOT ANTOINE ☐ Delete  
STREET ADDRESS 6355 METRO WEST BLVD SUITE 180  
CITY-ST-ZIP ORLANDO FL 32835

TITLE MGR  
NAME HARRILL DONALD L ☐ Delete  
STREET ADDRESS 6355 METRO WEST BLVD SUITE 180  
CITY-ST-ZIP ORLANDO FL 32835

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGR ☒ Change ☐ Addition  
NAME SLOAN REBECCA  
STREET ADDRESS 6355 METRO WEST BLVD SUITE 180  
CITY-ST-ZIP ORLANDO FL 32835

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.