

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001708

FILED  
Apr 28, 2011  
Secretary of State

**Entity Name:** LAKE BUENA VISTA RESORT VILLAGE III HOTEL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8101 RESORT VILLAGE DRIVE  
ORLANDO, FL 32821

**New Principal Place of Business:**

**Current Mailing Address:**

8101 RESORT VILLAGE DRIVE  
ORLANDO, FL 32821

**New Mailing Address:**

7011 GRAND NATIONAL DRIVE  
SUITE 104  
ORLANDO, FL 32819

FEI Number: 26-2104907

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SKY RESORT MANAGEMENT  
7011 GRAND NATIONAL DRIVE  
SUITE 104  
ORLANDO, FL 32819 US

**Name and Address of New Registered Agent:**

LAKE BUENA VISTA RESORT & SPA MGMT  
7011 GRAND NATIONAL DRIVE  
SUITE 104  
ORLANDO, FL 32819 US

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: JOHN GORDON

04/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: COHEN, LARRY S  
Address: 8101 RESORT VILLAGE DRIVE  
City-St-Zip: ORLANDO, FL 32821

Title: VP  
Name: SUTTON, SAM  
Address: 8101 RESORT VILLAGE DRIVE  
City-St-Zip: ORLANDO, FL 32821

Title: STD  
Name: SUTTON, ROBERT  
Address: 8101 RESORT VILLAGE DRIVE  
City-St-Zip: ORLANDO, FL 32821

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LARRY COHEN

P

04/28/2011

Electronic Signature of Signing Officer or Director

Date