FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State
DIVISION OF CORPORATIONS

____1996

SIGNATURE:

DOCUMENT # N35559

(6)

SAN REMO VACATIONS CLUB, INC.				A JAANITAA KAN INIAN ANKAA ANIAN ANIAN A	BIL ÖLGEK ÖYÖNLÖKEKI DIBUL OYDIL AVON KEBI
Principal Plac	e of Business	Mailing Address			
% PETER DE	E JONG	C/O JACQUES DE B	OH HIA		
472 FIRST ST. W. 472 1ST W					
TIERRA VERI	DE FL 33715-1707	Tierra verde fl 3: Us	3715-1 70 1	Date Incorporated or Qualified	3a. Date of Last Report
		03		12/08/1989	05/01/1995
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	W	26		59-3077203	Not Applicable
Suite, Apt. 22	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	55.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country	Zφ	Country	8. This corporation has liability for int	
(4)	25 9. Name and Address of Curre	29 29 Agent	30	Florida Statutes 10. Name and Address of New Reg	Yes No
	0. 110/110 2112 PAGE 000 01 04112	ont ringistered Agent	81 Name		
DE RRII	LIM JACQUES V			arren J. Whaust	
DE BRUIJM JACQUES 472 FIRST ST. W.			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
	VERDE FL 33715		83	C CETTION AC	
******	7ENDE 1 E 007 10				
	-		ST PE	eteks bur 6	FL 85 Zip Code 7 1 2 .
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Stat	utes, the above named corpora	abon submits this statement for the purpo	use of changing its registered office.
or registe familiar w	red agent, or both, in the State of Flor rith, and accept the obligations of Sec	rida. Such change was autho ction 61/2 0503. Florida Statut	rized by the corporation's board	ation submits this statement for the purpo d of directors. I hereby accept the appoin	tment as registered agent. I am
SIGNATURE		1/>	-WARREN J.	NNAUST C	120/96
SIGNATURE	Senture used or probabilismie of registered ager	of and title if applicative	NO'E Registered Agent signature required	where reinstating)	DATE
12.	T =	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	RS AND DIRECTORS IN 12
TITLE	D	DELETE	11 THILE		Change Addition
NAME	SCHMIDT JEAN MARTE		12 NAME		
STREET ADDRESS	C/O-472 FIRST STR W.		1.3 STREET ADDRESS		
CITY-ST-ZIP	THERRA VERDE FL		1.4 CrTY - ST - ZiP		
TITLE	D VANDOUTTE ANTIQUIETTE	DELETE	21 THTLE		Change Addition
NAME	VAN RUTTE, ANTOINETTE		2 2 NAME		
STREET ADDRESS	472 FIRST ST. W.		2 3 STREET ADDRESS		ı
CITY-ST-ZIP TITLE	TIGARKA VERBA FL PTS	DELETE	2 4 CITY - ST - ZIP		☐ Shange ☐ Addition
NAME	DE BRUIJH, JACQUES		31 TITLE	DTS Ebruijh Jacou	Thange ☐ Addition
STREET ADDRESS	472 FIRST ST. W.			E BRHIJII CHOO	A E J
DITY-ST-ZIP	TIERRA VERDE FL		3 3 STREET ADDRESS		
TITLE	D	DELETE	3.4. CITY - ST - ZIP 4 * TITLE		Change Addition
NAME	PAY WILL		4 2 NAME		
STREET ADDRESS	472 IST STK	W	4.3 STREET ADDRESS		
CITY-ST-ZIP	TIERKA VEKK)F. FL	44 CITY -ST ZIP		
TITLE	D	DELETE	5 1 TITLE	- 60000106! -06/18/960111	Shange Addition
NAME	BOOH MAKIO		5.2 NAME	-06/18/860111	d03Z
STREET ADDRESS	472 IST STRU	<i>)</i>	5 3 STREET ADDRESS	***1522.50	
CITY-ST-ZIP	TIERRA VERO	E FL.	5 4 CITY - ST - ZIP		
TITLE	DVP	DELETE	61 TITLE		☐ Change ☐ Addition
NAME	JOEP DE BRU		6.2 NAME		
STREET ADDRESS	472 ST STR W	• • • • • • • • •	6.3 STREET ADDRESS		
CITY-ST-Z:P	TERRA VERD	E FL 33715	• 6.4 CITY - ST - 2IP		
				r the exemption stated in Section 119.07 e and that my signature shall have the sa	
oatn, triat	I am an officer or director of the corporation Block 12 or Block 13 if changed, or	ofation of the receiver of trust	lea ampowered to execute this.	report as required by Chapter 617, Florid	la Statutes; and that my name

DESCRIPTION OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR