

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



DEPARTMENT OF STATE  
Secretary of State  
Secretary of State  
Tallahassee, Florida

APPROVED  
AND  
FILED

95 MAY -1 PM 12:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N40896 (5)

DISNEY VACATION CLUB CONDOMINIUM ASSOCIATION, IN C.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: 6751 FORUM DR, SUITE 220, ORLANDO FL 32821  
Mailing Address: 6751 FORUM DR, SUITE 220, ORLANDO FL 32821

3. Date Incorporated or Qualified <b>11/20/1990</b>	3a. Date of Last Report <b>02/23/1994</b>
4. FCC Number <b>59-3039578</b>	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Disclosure Statement <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. Does corporation have liability for uncollectible tax under S 199.037 Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Agent's name and address 21. State April 1995 22. City & State 23. Zip 24. Country	2a. Agent's name and address 26. State April 1995 27. City & State 28. Zip 29. Country
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9. Name and Address of Current Registered Agent <b>IOPPOLO, S FRANK 1375 BUENA VISTA DRIVE FOUR NORTH LAKE BUENA VISTA FL 32830-1000</b>	10. Name and Address of New Registered Agent										
<table border="1"> <tr> <td>B1</td> <td>Name</td> </tr> <tr> <td>B2</td> <td>Street Address (P.O. Box Number or Not Acceptable)</td> </tr> <tr> <td>B3</td> <td>City</td> </tr> <tr> <td>B4</td> <td>State</td> </tr> <tr> <td>B5</td> <td>Zip Code</td> </tr> </table>		B1	Name	B2	Street Address (P.O. Box Number or Not Acceptable)	B3	City	B4	State	B5	Zip Code
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B5	Zip Code										

11. If you are the principal officer and shareholder of a corporation or a partnership, the officer or partner corporation or partner, this statement for the purpose of this report is required either for the corporation or partner, as the case may be, or for the corporation or partnership, as the case may be, if the corporation or partnership is a corporation or partnership, as the case may be, under the laws of the State of Florida. If you are not the principal officer and shareholder of a corporation or a partnership, this statement is not required.

12. CHANGE OF REGISTERED AGENT (SEE INSTRUCTIONS)

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14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not apply for the exemption stated in Section 199.037, Florida Statutes, Chapter 199, that the information is required for the annual report of a corporation or partnership or for the annual report of a corporation or partnership, as the case may be, and that my signature shall have the same legal effect as if made under oath. I understand the consequences of the receipt of this information by the State of Florida, and that my signature on this report is required by Chapter 199, Florida Statutes, and that my signature on this report shall have the same legal effect as if made under oath.

SIGNATURE: (818) 560-1000  
MARSHA AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Marsha L. Reed  
4/19/95