FILED

## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Apr 29, 2002 8:00 am § Secretary of State **DOCUMENT # N40896** 1. Entity Name DISNEY VACATION CLUB CONDOMINIUM ASSOCIATION, IN 04-29-2002 90020 032 \*\*\*\*70.00 Principal Place of Business Mailing Address 200 CELEBRATION PLACE 200 CELEBRATION PLACE **CELEBRATION FL 34747 CELEBRATION FL 34747** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3039578 Not Applicable Zio Country Zip Country \$8.75 Additional Certificate of Status Desired $\nabla$ Fee Required 46. Name and Address of Current Registered Agent. -- 7. Name and Address of New Registered Agent Jeffrey H. Smith Street Address (P.O. Box Number is Not Acceptable) IOPPOLO, S FRANK 1375 Buena Vista Drive 1375 BUENA VISTA DRIVE FOUR NORTH Four North LAKE BUENA VISTA FL 32830-1000 Zip Code 32830-1000 Lake Buena Vista 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 and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. DAS TITLE ☐ Defete TITLE ☐ Change Addition NIEMAN, LEIGH ANNE NAME NAME STREET ADDRESS 200 CELEBRATION PLACE STREET ADDRESS CITY-ST-ZIE **CELEBRATION FL 34747** CITY-ST-ZIE TITLE ☐ Delete TITLE DP Tr Change ☐ Addition AGUEL, GEORGE NAME NAME AGUEL, GEORGE 1375 BUENA VISTA DRIVE #410 STREET ADDRESS STREET ADDRESS 200 CELEBRATION PLACE LAKE BUENA VISTA FL 32830 CITY-ST-ZIP CITY-ST-ZIP\_ CELEBRATION FL-34747 TITLE ☐ Delete TITLE T Change ☐ Addition DVS SCHULTZ, TERRI A NAME NAME KATHEDER, THOMAS M. 200 CELEBRATION PLACE STREET ADDRESS STREET ADDRESS 1375 BUENA VISTA DRIVE, FOUR NORTH CELEBRATION FL 34747 CITY-ST-ZIP CITY-ST-ZIP LAKE BUENA VISTA, FL 32830 TITLE ☐ Delete TITLE ☐ Change Addition REED, MARSHA L. NAME NAME 500 S BUENA VISTA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BURBANK CA CITY-ST-7/P ASD **XX**Delete TITLE Change TITLE X Addition FLAMM, ILESE M NAME NAME BURNLEY, RICK 1375 BUENA VISTA DR 4N STREET ADDRESS STREET ADDRESS 200 CELEBRATION PLACE CITY-ST-ZIP LAKE BUENA VISTA FL 32830 CITY-ST-ZIP CELEBRATION, FL 34747 TITLE ☐ Delete TITLE Change **X** Addition KATHEDER, THOMAS M NAME NAME CLENDENIN, DOTTIE 1375 BUENA VISTA DR. 4N STREET ADDRESS STREET ADDRESS 200 CELEBRATION PLACE LAKE BUENA VISTA FL 34747 CITY-ST-ZIP CITY-ST-ZIP CELEBRATION, FL 34747

12. I hereby certify that the information supplied with this filling 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. Leigh Anne Nieman Assistant Secretary

REQUIRED

407-566-3000

Daytime Phone #