2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43112

FILED Feb 01, 2008 Secretary of State

Entity Name: VACATION VILLAS AT FANTASYWORLD TIME-SHARE OWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 5005 KYNGS HEATH ROAD KISSIMMEE, FL 34746 **Current Mailing Address: New Mailing Address:** 5005 KYNGS HEATH ROAD KISSIMMEE, FL 34746 FEI Number: 59-3063633 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COLLINS, KEN 5005 KYNGS HEATH ROAD KISSIMMEE, FL 34746 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WEINLAND, JEFF Name: Name: 7320 FAIRINGTON COURT Address: Address: City-St-Zip: ORLANDO, FL 32819 City-St-Zip: Title: () Delete Title: (X) Change () Addition DOUG, MCANDLESS Name: ARTHUR, WASHINGTON Name: Address: 679 CLERMONT AVENUE Address: 456 MEADOW RIDGE DRIVE City-St-Zip: LONDON, ON N5X1N3 City-St-Zip: TALAHASSEE, FL 32312 Title: STD () Delete Title: () Change () Addition EJUWA, JONATHAN Name: Name: 4702 STRATFORD LANE Address: Address: City-St-Zip: EAGAN, MN 55123 City-St-Zip: Title: **VPD** () Delete Title: () Change () Addition Name: SLADKEY, JOHN Name: Address: 12812 LINDEN Address: City-St-Zip: LEAWOOD, KS 66209 City-St-Zip: Title: () Delete Title: (X) Change () Addition COLLARD, DAVID FURLONG, RICHARD Name: Name: 1132 CLERIHUE ROAD **677 UNION STREET** Address: Address: PORT COQUITLAM, BC V3C6H2 City-St-Zip: City-St-Zip: ROCKLAND, MA 02370

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JEFFREY WEINLAND MR 02/01/2008