

4-14-97 B-4588 C
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FILED
Apr 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000000081 (7)

1. Corporation Name

GRANDE VISTA OF ORLANDO CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business % MARRIOTT RESORTS HOSPITALITY CORP. 1200 U.S. HIGHWAY 98 SOUTH, STE. 10 LAKELAND FL 33801	Mailing Address % MARRIOTT RESORTS HOSPITALITY CORP. 1200 U.S. HIGHWAY 98 SOUTH, STE. 10 LAKELAND FL 33801-5904
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3. Date Incorporated or Qualified 12/29/1995	3a. Date of Last Report 04/01/1996
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2. Principal Place of Business 21 5925 Avenida Vista Suite, Apt. #, etc.	2a. Mailing Address 26 5925 Avenida Vista Suite, Apt. #, etc.
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4. FEI Number APPLIED FOR 593359241	Applied For Not Applicable
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22 23 City & State Orlando FL	27 28 City & State Orlando FL
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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24 Zip 32821	25 Country USA	29 Zip 32821	30 Country USA
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6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

LOVE, WILLIAM J % MARRIOTT RESORTS HOSPITALITY CORP. 1200 U.S. HIGHWAY 98 SOUTH, STE. 10 LAKELAND FL 33801

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 6649 Westwood Blvd.
83 Suite 400
84 City Orlando, FL
85 Zip Code 32821

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title (Applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

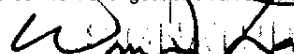
12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP	☐ DELETE
NAME	LOVE, WILLIAM J	
STREET ADDRESS	1200 US HWY 98 S., STE. 10	
CITY-ST-ZIP	LAKELAND FL 33801	
TITLE	DV	☐ DELETE
NAME	BRADLEY, C. STEPHEN	
STREET ADDRESS	1200 US HWY 98 S., STE. 10	
CITY-ST-ZIP	LAKELAND FL 33801	
TITLE	DST	☐ DELETE
NAME	ALBERT, JOHN	
STREET ADDRESS	1200 US HWY 98 S., STE. 10	
CITY-ST-ZIP	LAKELAND FL 33801	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	6649 Westwood Blvd Suite 400
1.4 CITY-ST-ZIP	Orlando, FL 32821
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	6649 Westwood Blvd Suite 400
2.4 CITY-ST-ZIP	Orlando, FL 32821
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	5925 Avenida Vista
3.4 CITY-ST-ZIP	Orlando, FL 32821
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE: 

CR2E037 (9/96)