

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2002 8:00 am
Secretary of State

03-19-2002 90029 038 *****61.25

DOCUMENT # 19400000000081

1. Entity Name

Grande Vista of Orlando Condominium Association, Inc.

Principal Place of Business

5925 Avenida Vista
 Orlando FL 32821 US

Mailing Address

% Resort Operations
 6649 Westwood Blvd. Suite 500
 Orlando FL 32821
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

593359241

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

The Prentice-Hall Corporation System, Inc.
 1201 Hays Street
 Tallahassee FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
 FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President John Albert 6649 Westwood Blvd. Orlando FL 32821	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President John McSween 12834 Country Ridge Circle Litchfield Park TX 75216	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director James Shonkwiler 6649 Westwood Blvd. Orlando FL 32821	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Treasurer F. Lavar Christensen 12308 South Raleigh Ct. Draper, Utah 84090	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chad Jensen - Director 6649 Westwood Blvd. Orlando FL 32821	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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12. I 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 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.

SIGNATURE:

Chad Jensen CHAD JENSEN

3/1/02 407 206 6242

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)