2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000025738

Address:

City-St-Zip:

1950 LEGION DRIVE

WINTER PARK, FL 32789

FILED Aug 31, 2007 Secretary of State

Entity Name: VACATION ISLAND, INC. **Current Principal Place of Business: New Principal Place of Business:** 951 NORTH LAKE SYBELIA DRIVE MAITLAND, FL 32751 **Current Mailing Address: New Mailing Address:** 951 NORTH LAKE SYBELIA DRIVE MAITLAND, FL 32751 FEI Number: 65-0991167 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: TATICH, PHILIP WHWW, INC 1151 N ÖRANGE AVE 390 NORTH ORANGE AVENUE WINTER PARK, FL 327892548 US 15TH FLOOR ORLANDO, FL 32801 US 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: HAROLD L. DOWNING, VICE PRESIDENT OF WHWW 08/31/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition OYLER, THOMAS L Name: Name: 951 NORTH LAKE SYBELIA DRIVE Address: Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: DST Title: () Delete () Change () Addition Name: DARMOC, DENNIS Name: 1950 LEGION DRIVE Address: Address: WINTER PARK, FL 32789 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition OYLER, LYDIA Name: Name: 951 NORTH LAKE SYBELIA DRIVE Address: Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: () Delete Title: () Change () Addition DARMOC, SHERRY Name: Name:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: THOMAS L. OYLER **PRES** 08/31/2007