## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000076671

Entity Name: TIMESHARE AND VACATION PROPERTIES ONLINE, INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
255 S. ORANGE AVENUE SUITE 600 ORLANDO, FL 32801		255 S ORANGE AVE 6TH FLOOR ORLANDO, FL 32801	
Current Mailing Address:		New Mailing Address:	
P. O. BOX 1511 ORLANDO, FL 32802		PO BOX 1511 ORLANDO, FL 32802	
FEI Number: 01-0618445	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:	
PINO, LAURENCE J ES 255 S. ORANGE AVENU SUITE 600 ORLANDO. FL 32801 U	JĖ		

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition

Name: SCOTT, DAMON Name: SCOTT, DAMIAN
Address: 255 S ORANGE AVENUE 6TH FLOOR Address: 255 S ORANGE AVE 6TH FLOOR

Address: 255 S ORANGE AVENUE, 6TH FLOOR Address: 255 S ORANGE AVE 6TH FLOOR City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

Tiller C (A) Delete

Title: S () Delete Title: S (X) Change () Addition
Name: WILSON, PATRICIA J Name: WILSON, PATRICIA T

 Address:
 255 S ORANGE AVENUE, 6TH FLOOR
 Address:
 255 S ORANGE AVE 6TH FLOOR

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:
 ORLANDO, FL 32801

Title: T () Delete Title: T (X) Change () Addition

Name: NICKERSON, CRAIG
Address: 255 S ORANGE AVENUE, 6TH FLOOR
Address: 255 S ORANGE AVENUE, 6TH FLOOR

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: DAMIAN SCOTT DP 04/28/2005