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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Timeshare + Vacation (Name of Cor	Properties, the.
DOCUMENT NUMBER: PO20005	0975
The enclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to	o the following:
•	-
(Name of Conta	, CPA
(Name of Conta	act Person)
	_
Vacations Only (Firm/Com	Inc.
(rimi/com	ipany)
11059 Interna	tional Drive
(Addres	ss)
	2.6.1
Orlando, FL (City/State and	3282[
(-1.5/.2.1117.1111	
For further information concerning this matter, please cal	II:
Tim Hanky	at (407 465 /888 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departm	ent of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
Tananassee, rl 32314	2001 Executive Center Circle

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of Flori
	to change its registered office or registered agent, or both, in the State of Florida.
I. The name of the	ecorporation: Timeshare + Vacation Properties Inc.
2. The principal of	ffice address: 11059 International Dr
	Orlundo, FL 32821
3. The mailing add	dress (if different):
4. Date of incorpor	ration/qualification: 5/4/02 Document number: P02000050975
5. The name and s Florida Departn	
	Courte, Angela
_	Courte, Angela 5750 Major Blue Ste 100
_	Orlando, FL 32819
6. The name and so (if changed):	treet address of the new registered agent (if changed) and /or registered office
_	Courte, Angela
_	Courte, Angela 11659 International Dr. (P.O. Box NOT acceptable)
	Orlando, FL 32821
The street address as changed will be	of its registered office and the street address of the business office of its registered agent, e identical.
_	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Consture	of an officer or director) Angella Courte Arcsi's end (Printed or typed name and title)
/ /	e appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligation of my position as registered agent. Or, if this giled merely to reflect a change in the registered office address, I hereby confirm that the een notified in writing of this change.
(Stigna	iture of Registered Agent) (Date)
If signing on beha	
Angelo	ed or Printed Name)

* * * FILING FEE: \$35.00 * * *