

## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000077638

FILED  
Jun 07, 2009  
Secretary of State

Entity Name: ICARE TIMESHARE MARKETING GROUP INC.

**Current Principal Place of Business:**

2700 W CYPRESS CREEK RD, STE C106  
FT. LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

2700 W CYPRESS CREEK RD, STE C106  
FT. LAUDERDALE, FL 33309

**New Mailing Address:**

FEI Number: 26-3428153

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DISGDIERTT, DANIEL JR  
10401 N. LAKE VISTA CIRLCE  
DAVIE, FL 33328 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DISGDIERTT, DANIEL JR  
Address: 10401 N. LAKE VISTA CIRLCE  
City-St-Zip: DAVIE, FL 33328 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: DISGDIERTT, DAVID A  
Address: 2103 NE 40TH RD  
City-St-Zip: HOMESTEAD, FL 33033 US

Title: S ( ) Change (X) Addition  
Name: DISGDIERTT, SHEILA D  
Address: 616 PETRONIA ST  
City-St-Zip: KEY WEST, FL 33040 US

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.

SIGNATURE: DAVID DISGDIERTT

VP

06/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date