

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000077638

FILED  
Apr 06, 2010  
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:**

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

DISGDIERTT, DAVID A  
2700 W CYPRESS CREEK RD  
SUITE C106  
FORT LAUDERDALE, FL 33309 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: DAVID DISGDIERTT

04/06/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

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

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

Title: T  
Name: DISGDIERTT, DIANE  
Address: 616 PETRONIA ST  
City-St-Zip: KEY WEST, FL 33040

Title: P  
Name: DISGDIERTT, DAVID A  
Address: 2103 NE 40TH RD  
City-St-Zip: HOMESTEAD, FL 33033 US

I hereby 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 all other like empowered.

SIGNATURE: DAVID DISGDIERTT

P

04/06/2010

Electronic Signature of Signing Officer or Director

Date