

2006 FOR PROFIT CORPORATION ANNUAL REPORT

~~PENDING~~
P24479

FILED

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66022219 OF STATE
TALLAHASSEE, FLORIDA



07112006 Chg-P CR2E034 (11/05)

DOCUMENT # P24479					
1. Entity Name MARRIOTT RESORTS, TRAVEL COMPANY, INC.					
Principal Place of Business 10400 FERNWOOD ROAD BETHESDA, MD 20817 US			Mailing Address 10400 FERNWOOD ROAD DEPT. 924.13 BETHESDA, MD 20817		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 52-1630628	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE _____					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIMBALL, KEVIN M ☐ Delete 10400 FERNWOOD RD. BETHESDA, MD		TITLE NAME STREET ADDRESS CITY-ST-ZIP	5000200410355 ☐ Change ☐ Addition 09/21/06--01055--022 ***400.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S INGALLS, DOROTHY M ☒ Delete 10400 FERNWOOD RD. BETHESDA, MD 20817		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Turner, Terri L. ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PULSE, LESTER ☐ Delete 10400 FERNWOOD RD. WARRENTON, VA 20187		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BENZ, NANCY L. ☐ Delete 10400 FERNWOOD RD. BETHESDA, MD		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HANDLON, CAROLYN ☐ Delete 10400 FERNWOOD RD. BETHESDA, MD		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	05/04/06 90219 038 ☐ Change ☒ Addition \$150.00	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Nancy Benz</u> Assist Secy <u>7/17/06</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

[Handwritten signature]