## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED **DOCUMENT # P37848** Apr 21, 2000 8:00 am 1. Entity Name Secretary of State GLOBAL VACATION GROUP, INC. 04-21-2000 90053 005 \*\*\*150.00 Mailing Address Principal Place of Business 1420 NEW YORK AVE., N.W. 1420 NEW YORK AVE., N.W. SUITE 550 SUITE 550 WASHINGTON DC 20005-2122 WASHINGTON DC 20005 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 13-1894967 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees П (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition **CCEO** TITLE KENNETH M. DUBERSTEIN Change 2100 Pennsylvania aue. N.W. Washington, D.C. 20037 TITLE ☐ Delete NAME NAME BALLOU, ROGER H STREET ADDRESS STREET ADDRESS 1420 NEW YORK AVE., N.W., STE. 550 CITY-ST-ZIP CITY-ST-ZIP WASHINGTON DC 20005 ☐ Change ☐ Addition TITLE TITLE PCF0 JAMES M. JULLIVAN LEWIS, J. RAYMOND NAME NAME 10400 FERNWOOD DR. STREET ADDRESS STREET ADDRESS 1420 NEW YORK AVE., N.W., STE. 550 CITY-ST-ZIP CITY-ST-ZIP BETHESDA MD. WASHINGTON DC 20005 ☐ Change ☐ Addition ☐ Delete TITLE TITLE **EVPT** NAME NAME STUART, JAY G STREET ADDRESS STREET ADDRESS 1420 NEW YORK AVE., N.W., STE. 550 CITY-ST-ZIP CITY-ST-ZIP WASHINGTON DC 20005 ☐ Change Addition TITI F GCS ☐ Delete TITLE NAME NAME GILBERTSON, LARRY R STREET ADDRESS STREET ADDRESS 1420 NEW YORK AVE NW, STE 550 CITY-ST-ZIP CITY-ST-ZIP WASHINGTON DC 20005 ☐ Change Addition ☐ Delete TITLE TITLE NAME MALEK, FREDERIC V NAME STREET ADDRESS STREET ADDRESS 1455 PENNSYLVANIA AVE NW, STE 350 CITY-ST-ZIP CITY-ST-ZIP WASHINGTON DC 20005 □ Change ☐ Delete ☐ Addition TITLE TITI F NAME NAME RICKERTSEN, CARL J STREET ADDRESS STREET ADDRESS 1455 PENNSYLVANIA AVE., STE. 350 CITY-ST-7IP CITY-ST-ZIP WASHINGTON DC 20004 13. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the eceiver or trustee expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

with all other like:

SIGNATURE: