

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 21 AM 8:05

DOCUMENT # P94000015064 (6)

1. Corporation Name

VACATION HOSPITALITY SERVICES, INC.

Principal Place of Business
1515 LAKE DANIEL DRIVE
ORLANDO FL 32804

Mailing Address
1515 LAKE DANIEL DRIVE
ORLANDO FL 32804

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/21/1994	3a. Date of Last Report
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4. FEI Number	59-3230020	Applied For
		Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

6. This corporation has liability for marketing tax under §. 100.002.
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TRIOLO, PETER C
1515 LAKE DANIEL DRIVE
ORLANDO FL 32804

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City

FL	85	Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

10-11-1971

NOTE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1972

TITLE	PRESIDENT
NAME	KATHLEEN L. TRIOLO
STREET ADDRESS	1515 LAKE DANIEL DR
CITY ST ZIP	ORLANDO FL 32804

TITLE	VICE PRES.
NAME	PETER C. TRILO
STREET ADDRESS	1515 LAKE DANIEL DR
CITY ST ZIP	GIRLANDO FL 32804

TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

TITLE			
NAME			
STAFF ADDRESS			
CITY ST ZIP			

TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE		☐ Change	☒ Addition
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12 NAME
13 STREET ADDRESS
14 CITY ST ZIP

2.1 TITLE	☐ Change	☒ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY, ST, ZIP		

3 1 TITLE	Change	Addition
3 2 NAME		
3 3 STREET ADDRESS		
3 4 CITY - ST. ZIP		

41 TITLE	Change	Addition
42 NAME		
43 STREET ADDRESS		
44 CITY, ST, ZIP		

5 1 TITLE	☐ Change ☐ Additions
5 2 NAME	
5 3 STREET ADDRESS	
5 4 CITY, ST, ZIP	

5.4 CITY ST ZIP		☐ Change	☐ Addition
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY ST ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.073(3)(g), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 667, Florida Statutes, and that my name appears in Block 12 or Block 13 of the report, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PETER C. TRILOLO

114

Editorial

11-12-13	14-15-16	17-18-19	20-21-22	23-24-25	26-27-28	29-30-31	32-33-34	35-36-37	38-39-40	41-42-43	44-45-46	47-48-49	50-51-52	53-54-55	56-57-58	59-60-61	62-63-64	65-66-67	68-69-70	71-72-73	74-75-76	77-78-79	80-81-82	83-84-85	86-87-88	89-90-91	92-93-94	95-96-97	98-99-100	101-102-103	104-105-106	107-108-109	110-111-112	113-114-115	116-117-118	119-120-121	122-123-124	125-126-127	128-129-130	131-132-133	134-135-136	137-138-139	140-141-142	143-144-145	146-147-148	149-150-151	152-153-154	155-156-157	158-159-160	161-162-163	164-165-166	167-168-169	170-171-172	173-174-175	176-177-178	179-180-181	182-183-184	185-186-187	188-189-190	191-192-193	194-195-196	197-198-199	200-201-202	203-204-205	206-207-208	209-210-211	212-213-214	215-216-217	218-219-220	221-222-223	224-225-226	227-228-229	230-231-232	233-234-235	236-237-238	239-240-241	242-243-244	245-246-247	248-249-250	251-252-253	254-255-256	257-258-259	260-261-262	263-264-265	266-267-268	269-270-271	272-273-274	275-276-277	278-279-280	281-282-283	284-285-286	287-288-289	290-291-292	293-294-295	296-297-298	299-300-301	302-303-304	305-306-307	308-309-310	311-312-313	314-315-316	317-318-319	320-321-322	323-324-325	326-327-328	329-330-331	332-333-334	335-336-337	338-339-340	341-342-343	344-345-346	347-348-349	350-351-352	353-354-355	356-357-358	359-360-361	362-363-364	365-366-367	368-369-370	371-372-373	374-375-376	377-378-379	380-381-382	383-384-385	386-387-388	389-390-391	392-393-394	395-396-397	398-399-400	401-402-403	404-405-406	407-408-409	410-411-412	413-414-415	416-417-418	419-420-421	422-423-424	425-426-427	428-429-430	431-432-433	434-435-436	437-438-439	440-441-442	443-444-445	446-447-448	449-450-451	452-453-454	455-456-457	458-459-460	461-462-463	464-465-466	467-468-469	470-471-472	473-474-475	476-477-478	479-480-481	482-483-484	485-486-487	488-489-490	491-492-493	494-495-496	497-498-499	500-501-502	503-504-505	506-507-508	509-510-511	512-513-514	515-516-517	518-519-520	521-522-523	524-525-526	527-528-529	530-531-532	533-534-535	536-537-538	539-540-541	542-543-544	545-546-547	548-549-550	551-552-553	554-555-556	557-558-559	560-561-562	563-564-565	566-567-568	569-570-571	572-573-574	575-576-577	578-579-580	581-582-583	584-585-586	587-588-589	590-591-592	593-594-595	596-597-598	599-600-601	602-603-604	605-606-607	608-609-610	611-612-613	614-615-616	617-618-619	620-621-622	623-624-625	626-627-628	629-630-631	632-633-634	635-636-637	638-639-640	641-642-643	644-645-646	647-648-649	650-651-652	653-654-655	656-657-658	659-660-661	662-663-664	665-666-667	668-669-670	671-672-673	674-675-676	677-678-679	680-681-682	683-684-685	686-687-688	689-690-691	692-693-694	695-696-697	698-699-700	701-702-703	704-705-706	707-708-709	710-711-712	713-714-715	716-717-718	719-720-721	722-723-724	725-726-727	728-729-730	731-732-733	734-735-736	737-738-739	740-741-742	743-744-745	746-747-7
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SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/93: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000016099 (1)

1. Corporation Name

HOLY HILLS INVESTMENTS, INC.

Principal Place of Business

5005 NW 58TH TER
CORAL SPRINGS FL 33067

Mailing Address

5005 NW 58TH TER
CORAL SPRINGS FL 33067

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/01/1994

3a. Date of Last Report

3/1/94

4. FEI Number

65-0475328

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes



No

2. Principal Place of Business

21 2400 E Commercial Blvd.

2a. Mailing Address

26 2400 E Commercial Blvd.

Suite, Apt. #, etc.

22 Suite 204

Suite, Apt. #, etc.

27 Suite 204

City & State

23 Ft. Lauderdale FL

City & State

28 Ft. Lauderdale FL

Zip

24 33308

Country

25 USA

Zip

29 33308

Country

30 USA

9. Name and Address of Current Registered Agent

URI, SUZAN

5005 NW 58TH TER

CORAL SPRINGS FL 33067

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and title if applicable)

(If 11. Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

Change

Addition

Change

Addition

Change

Addition

Change

Addition

Change

Addition

Change

Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Suzan Uri

6-8-95

305 771-3776