

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000089899 (6)

1. Corporation Name

TIMESHARE LIQUIDATORS, INC.



Principal Place of Business

Mailing Address

5728 MAJOR BLVD  
200  
ORLANDO FL 32819  
US

5333 GREENSIDE COURT  
ORLANDO FL 32819

3. Date Incorporated or Qualified  
12/12/1994

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 5728 MAJOR BLVD

22 City & State

27 Suite 200  
28 ORLANDO FL

23 Zip

Country

29 32819

Country

24 25 30 USA

4. FEI Number

19-3284622

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TOSI, RONALD E  
5728 MAJOR BLVD SUITE 200  
ORLANDO FL 32819

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 Officer Registered Agent signature required when reinstating)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PRES  
TOSI, RONALD E  
5728 MAJOR BLVD SUITE 200  
ORLANDO FL

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP  
Change ☐ Addition ☐

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DELETE ☐

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP  
Change ☐ Addition ☐

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DELETE ☐

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP  
Change ☐ Addition ☐

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DELETE ☐

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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DELETE ☐

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP  
Change ☐ Addition ☐

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DELETE ☐

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP  
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 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-7-96

Date

Daytime Phone

CR2E034 (3/96)