

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**May 01, 2006 08:00 AM
Secretary of State**

DOCUMENT # P95000015560

1. Entity Name
INTERVAL INTERNATIONAL HOLDINGS, INC.



Principal Place of Business

**6262 SUNSET DRIVE
PH 1
MIAMI, FL 33143**

Mailing Address

**6262 SUNSET DRIVE
PH 1
MIAMI, FL 33143**



03312006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0575608

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**MARBERT, JEANETTE E
6262 SUNSET DRIVE
PH 1
MIAMI, FL 33143**

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

DATE
05/11/06-80113-022 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	NASH, CRAIG M
STREET ADDRESS	6262 SUNSET DR., PH 1
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	DCFO
NAME	DREW, W. CARL
STREET ADDRESS	6262 SUNSET DRIVE
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	DEVP
NAME	MARBERT, JEANETTE E
STREET ADDRESS	6262 SUNSET DRIVE
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	AS
NAME	WEST, JENNIFER A.
STREET ADDRESS	6262 SUNSET DRIVE, PH 1
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	S
NAME	KINCKE, VICTORIA J
STREET ADDRESS	6262 SUNSET DR PH 1
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Victoria J. Kincke, Secretary

4/25/06
Date

305-666-1861
Daytime Phone #