2002 UNIFORM BUSINESS REPORT (UBR)

Apr 22, 2002 8:00 am 3 Secretary of State P95000051326 DOCUMENT # INTERVAL RESORT & FINANCIAL SERVICES, INC. Principal Place of Business Mailing Address 6262 SUNSET DRIVE 6262 SUNSET DRIVE PENTHOUSE 1 PENTHOUSE 1 **MIAMI FL 33143 MIAMI FL 33143** 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 65-0614258 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARBERT, JEANETTE E ESQ. Street Address (P.O. Box Number is Not Acceptable) 6262 SUNSET DRIVE PENTHOUSE 1 **MIAMI FL 33143** City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. **DCEO** ☐ Delete ☐ Addition TITLE TITLE Change NASH, CRAIG M NAME NAME 6262 SUNSET DRIVE, PENTHOUSE 1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33143** CITY-ST-ZIP DΡ TITLE ☐ Addition TITLE ☐ Delete RISHELL, PAUL W NAME NAME 6262 SUNSET DRIVE, PENTHOUSE 1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **MIAMI FL 33143** Addition C00 ☐ Change TITLE ☐ Delete TITLE NAME MARBERT, JEANETTE E NAME STREET ADDRESS 6262 SUNSET DRIVE PH 1 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33143** CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE KINCKE, VICTORIA J NAME NAME STREET ADDRESS 6262 SUNSET DRIVE, PH 1 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33143 CFO** ☐ Delete TITL F Change ☐ Addition TITLE NAME DREW, W. C NAME STREET ADDRESS 6262 SUNSET DRIVE, PH 1 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33143** CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE WEST, JENNIFER A NAME NAME 6262 SUNSET DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33143** CITY-ST-ZIP 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

4/12/02 Date

(305) 666-1861

Daytime Phone #