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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 02 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000046443 (3)

VACATION ONE, INC.

SIGNATURE:

Principal Place of Business Mailing Address 4403 57TH ST W 4403 57TH ST W BRADENTON FL 34208 BRADENTON FL 34			→2736					
				3	Date Incorporated or Qualified 05/22/1996	3a. Date of Las	st Report	
	ace of Business	2a. Mailing Address		. 4	. FEI Number	<u>, </u>	Applied For	
21 Cuito Ani	# At-	26 5724 Corts	ي لاكم س)ده	†	65-066797°	1 1	Not Applicable	
Suite, Apt	#, EMC.	Suite, Apt. #, etc.	0	5	. Certificate of Status Desired	1 7 7 7 7 7	5 Additional Frequired	
City & State	<u> </u>	City & State	·	6	Election Campaign Financing		00 May Be	
23		28 Bredeston	El	ľ	Trust Fund Contribution		led to Fees	
Zip	Country	Zip	Country	8	. This corporation has liability for in	—	er s. 199.032,	
24	25		30		1101100 011-10100	Yes No		
	9. Name and Address of Curren	t Hegistered Agent	81 Name-	10	Name and Address of New Re	Jistered Agent		
FLOODI, DARLENE N				Down	Soulene ik. Mouch			
	82 Street	Address (P.O. Box Number is Not Acceptab	1 st #2	39			
HEN	RA VERDE FL 33715		83		Correct Sa w	_4251	<u> </u>	
			24 22				73. 00-10	
			84 DV	husa	and .	FL 85 3	Zik Code	
agent. Fa: SIGNATURE	egistered agent, or both, in the State on familiar with, and accept the obligations. Specially agent to be supported by the state of th	ations of, Section 607.0505, Flo	uthorized by the corp rida Statutes. Registered Agent signature			pate	as registered	
12.	OFFICERS ANI	······································	13,		ADDITIONS/CHANGES TO OFFIC			
TITLE	D	DELETE	1.1 TITLE			Chan	*	
NAME	PLOUGH, DARLENE R		1.2 NAME	E	es Cortez Rdu	Jast #2	: ২১	
STREET ADORESS	106 9TH ST E TIERRA VERDE FL 33715		1.3 STREET ADDRESS	0 / 4	duton P1 3	4210	•	
DITY-S1-ZIP TITLE	D	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	200	d 04300 11 2	Chan	noe Addition	
NAME	PLOUGH, KATHY M	P. Start	22 NAME					
STREET ADDRESS	2705 GULF DR UNIT 3		2.3 STREET ADORESS					
CITY - S1 - ZIP	HOLMES BEACH FL		2. 4 CITY-ST-ZIP	ĺ				
TITLE		DELETE	3.1 TITLE		<u></u>	☐ Chan	nge Addition	
NAME			3.2 NAME	j				
STREET ADDRESS			3.3 STREET ADDRESS					
CiTY-ST-ZIP		December	3.4. CITY-ST-ZIP			[] ob	4457	
TITLE		☐ DELETE	4.1 TITLE			L Chan	nge L. Addition	
NAME STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS					
CITY-ST-ZiP			4.4 City-St-ZIP					
101E		DELETE	5.1 TiTLE		· · · · · · · · · · · · · · · · · · ·	Chan	nge Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
C(TY - \$1 - 7)P			5.4 CITY-ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE			Chan	nge Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
CITY+S1-ZIP		-1 -0 -0 2 - 00	6.4 CITY-ST-ZIP			11.5		
informatio Lam an o	by certify that the information supplied in indicated on this annual report or s fficer or director of the corporation or in Block 12 or Block 13 if changed, or	supplemental annual report is tri the receiver or trustee empower	ue and accurate and ered to execute this r	I that my t	signature shall have the same lega	l effect as if made	under oath; that	

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR