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FILED
Apr 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # P96000073406

1. Corporation Name

TIMESHARE TOURS OF AMERICA, INC.

Principal Place of Business
5085 Avenue of the Stars
Kissimmee, FL 34746

Mailing Address
SAME

Amendment
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 ~~N/A~~ SAME

2a. Mailing Address
26 N/A

Suite, Apt. #, etc
22

Suite, Apt. #, etc
27

City & State
23

City & State
28

Zip 24 | Country 25

Zip 29 | Country 30

3. Date Incorporated or Qualified 9.5.96

4. FEI Number 59-3397684 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

JOSEPH ALTER
16128 SANDHILL RD.
WINTER GARDEN, FL 34787

10. Name and Address of New Registered Agent

81 Name N/A
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 _____ 000002479140
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) -04/06/98--01011--001 DATE ****61.25

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DIRECTOR ☒ DELETE	1.1 TITLE	DIRECTOR ☒ Change ☐ Addition
NAME	JAMES E CRUMP	1.2 NAME	JOSEPH ALTER
STREET ADDRESS	8216 SARAGOZA COURT	1.3 STREET ADDRESS	16128 SANDHILL RD.
CITY-ST-ZIP	ORLANDO, FL 32836	1.4 CITY-ST-ZIP	WINTER GARDEN, FL 34787
TITLE	☐ DELETE	2.1 TITLE	DIRECTOR ☐ Change ☒ Addition
NAME		2.2 NAME	HEATH ALTER
STREET ADDRESS		2.3 STREET ADDRESS	11500 WESTWOOD BLVD. #736
CITY-ST-ZIP		2.4 CITY-ST-ZIP	ORLANDO, FL 32821
TITLE	☐ DELETE	3.1 TITLE	VICE PRESIDENT ☐ Change ☒ Addition
NAME		3.2 NAME	HEATH ALTER
STREET ADDRESS		3.3 STREET ADDRESS	11500 WESTWOOD BLVD. #736
CITY-ST-ZIP		3.4 CITY-ST-ZIP	ORLANDO, FL 32821
TITLE	☐ DELETE	4.1 TITLE	SECRETARY ☐ Change ☒ Addition
NAME		4.2 NAME	HEATH ALTER
STREET ADDRESS		4.3 STREET ADDRESS	11500 WESTWOOD BLVD. #736
CITY-ST-ZIP		4.4 CITY-ST-ZIP	ORLANDO, FL 32821
TITLE	☐ DELETE	5.1 TITLE	DIRECTOR ☐ Change ☒ Addition
NAME		5.2 NAME	MARY-ANN KLIMM
STREET ADDRESS		5.3 STREET ADDRESS	211 SHELL POINT WAY
CITY-ST-ZIP		5.4 CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	☐ DELETE	6.1 TITLE	VICE PRESIDENT ☐ Change ☒ Addition
NAME		6.2 NAME	MARY-ANN KLIMM
STREET ADDRESS		6.3 STREET ADDRESS	211 SHELL POINT WAY
CITY-ST-ZIP		6.4 CITY-ST-ZIP	MAITLAND, FL 32751

CR2E034 (10/97)

14. 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 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: Joseph Alter JOSEPH ALTER 3.11.98 (407)396-8300x:5264