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Mar 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000102539 (9)

1. Corporation Name

FLORIDA TRAVEL CLUB, INC.

Principal Place of Business

800 NORTH AGNOLIA AVENUE
SUITE 1500
ORLANDO FL 32803

Mailing Address

800 NORTH AGNOLIA AVENUE
SUITE 1500
ORLANDO FL 32803

3. Date Incorporated or Qualified

12/18/1996

3a. Date of Last Report

None

2. Principal Place of Business

21 800 NORTH MAGNOLIA AVENUE

2a. Mailing Address

26 100 NORTH MAGNOLIA AVENUE

Suite, Apt. #, etc.

22 SUITE 1500

City & State

23 ORLANDO

Zip

24 32803

Country

25 US

Suite, Apt. #, etc.

27 SUITE 1500

City & State

28 ORLANDO

Zip

29 32803

Country

30 US

4. FEI Number

XX 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

EGERTON, CHARLES H
800 NORTH AGNOLIA AVENUE
SUITE 1500
ORLANDO FL 32803

Block 10 completed
only to correct
typographical
errors in data
entr.

81 Name
EGERTON, CHARLES H.

82 Street Address (P.O. Box Number is Not Acceptable)

800 NORTH MAGNOLIA AVENUE

83 SUITE 1500

84 ORLANDO

FL 85 Zip Code
32803

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

DELETE

TITLE

NAME

STREET ADDRESS
60 MILLET ROAD, GREENFORD
LONDON, ENGLAND

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS
60 MILLET ROAD, GREENFORD
LONDON, ENGLAND

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

Change Addition

Change Addition

Change Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

26 Feb 1997

Date

0181 575 0953

Daytime Phone # 0012213

CR2034 (9/96)