## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P97000002998 (7

INTERNATIONAL RESORTS GROUP, INC.
NORTH AMERICAN RESORTS VACATION CLUB, INC.

## **FILED** Mar 06 1998 8:00am Secretary of State



2. Principal Py 21 250 Py Suite, Apt. #	LANDING BLVD 232778  IGB OF Business TEMPATIONAL PANKANY 1, 910.	27 City & State				quired May Be
⇒ <sup>Zig</sup> っつ4	U Country A	Zip	Country		8. This corporation owes or has paid the current year Into	angible No
24 10-17	9. Name and Address of Current F	29 Registered Agent	30		Personal Property Tax due June 30.  Yes  10. Name and Address of New Registered Agent	INO
222 LON	RANCESCO, JOSEPH 1 SPRINGS LANDING BLVD IGWOOD FL 32779		81 82 83 84	City	ress (P.O. Box Number is Not Acceptable)  FL 85 Zip C poration submits this statement for the purpose of changing its	
SIGNATURE 5	Tamiliar with, and accept the obligation    Interpolation   Interpolation   Interpolation	nd têle r applicable (NO	13.		ition's board of directors. I hereby accept the appointment as in ition's board of directors. I hereby accept the appointment as in ition's board of directors.  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS.  Change	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	2221 SPRINGS LANDING BLVD LONGWOOD FL 32779 D DIFRANCESCO, BERNADETTE 2221 SPRINGS LANDING BLVD	DELETE	1.2 NAME  1.3 STREET  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREET	r - ZIP	☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Debonna GNINDE 902 Millenber 0elfona FC	K AVE 22725	2. 4 CHY-S 3.1 TILE 3.2 NAME 3.3 STREET 3.4. CHY-S		Deborah GNIADEK 902 Millenbeck Ave Deltona, Fl 32725	Addition
TITLE NAME STREET ADDRESS CITY-ST-2IP		☐ DELETE	4.1 TITLE 4. 2 NAME 4.3 STREET 4.4 CITY - S	address	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CHY-S		□ Change	6 Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET 6.4 CITY - S	ADDRESS	600002452756 -03/10/9801084010 ***150.00	Addition

14. Thereby 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 trusted 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 of the property of the corporation of the corpora