FILED Apr 28, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000022706

1. Corporation Name

CITY-ST-ZIP

WORLDWIDE RESORTS CLUB, INC.

Principal Place of Business Mailing Address					ן ''	1411441 (14 1811) (PER) BEILL OF	!!!! BB!!! EE:!B !!!), 4	Hito atti toat
12400 S INTERNATIONAL DR ORLANDO FL 32821		12400 S INTERNATIONAL DR ORLANDO FL 32821				DO NOT WRI	TE IN TH S S	SPACE	
US		US			3. Date Incorporated or Qualifed				
					I	/1997			
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Nu			App	ied For
21		26			59-35	01687		Not	Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Ac ditional Fee Required				
City & State	3	City & State			6. Election Campaign Financing Solution				
Zip	Coun ry	Zip Country			8. This corporation owes the current year Intangible				
24	25	29 30				al Property Tax.			1200
	9. Name and Address of Current	Registered Agent	81	I Name	10. Name	and Address of New F	Registere 1 A	gent	
COD	PORATION SERVICE COMPANY		0'	1 Z	A.G.C.	Co.			
	HAYS STREET		82	Street Add	rec- (D.C. D.	- (C.C. 11), (C. 11)			
	AHASSEE FL 32301-2525		83						
17166	A MODEL I E GEOGI EGE			2	00 S. 01	ange Avenue,	, Suite	2300	
	1 ()		84	' (Orlando		FL		0112
11. Pursuant to office or reagent. I ar	o the provisions of Sections 607 0502 agistered agent, or both, in the State on a familiar/with, and accept the obligati	and 607.1508 Florida Statu es, Florida Such change was auth ions of Section 607.0505, Florida	the above origed by a Statute	re-named corp the corporations.	ooration submi on's board of o	s this statement for the firectors. I hereby acce	purpose of cl pt the appoint	nanging its r ment as regi	egistered pistered
SIGNATURE Signature, typed or princer native transferred during up that displacable (NOTI: F			1 /	ent signature require	ed when reinstating)	AGC O	DATE		
12.	OFFICERS AND		13.		ADDITIO	NS/CHANGES TO OF	FICERS / NE		
TITLE	D	☐ DELETE	11TITLE	+				Change	☐ Addition
NAME	GIANELLI, PETER A		. 1.2 NAME					•	
STREET ADDRESS 12400 S INTERNATIONAL DR		1.3 STREET ADDRESS		1					
CITY-ST-ZIP	ORLANDO FL 32821	☐ DELETE	14 CITY-ST-ZIP 2.1 TITLE					Change	Addition
TITLE			2.2 NAME					_ ,	_
NAME STREET ADDRESS	GIANELLI, PETER A 12400 S INTERNATIONAL DR		2.3 STREET ADDRESS						j
CITY-ST-ZIP ORLANDO FL 32821		2. 4 CITY-ST-ZIP							
TITLE	VST	X) DELETE	3.1 TITLE		John Mac	Donald		Change	☐ Addition
NAME	BAYNARD, STEPHEN		32 NAME			Internation	al Driv	e	
STREET ADDRESS	12400 S INTERNATIONAL DR		3.3 STREET ADDRESS			F1. 32821			
CITY-ST-ZIP	ORLANDO FL 32821 34.0		3.4. CITY-		,				
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAME	i					
STREET ADDRESS			4.3 STREE	ET ADDRESS					
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				Change	Addition
TITLE	_		51 TITLE 52 NAME					☐ Change	☐ WARRING
NAME				ET ADDRESS					
STREET ADDRE IS			5.4 CITY-5						
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	21-ZIF				Change	Addition
TITLE		LI DECETE	6.2 NAME						
NAME			6.3 STREET ADDRESS						
STREET ADDRE 3S		ļ	0.0 3 INE						I

14. I hereb/ certify that the informat on 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 adnual report is true and against and mat 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 recuired 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 with all other like empowered. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME

6.4 CITY-ST-ZIP