

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000025056

Entity Name: VISTANA PSL, INC.

FILED
Apr 15, 2005
Secretary of State

Current Principal Place of Business:

8801 VISTANA CENTRE DRIVE
ORLANDO, FL 328216553

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 22197
LAKE BUENA VISTA, FL 328302197

New Mailing Address:

8801 VISTANA CENTRE DRIVE
ATTN: LEGAL SERVICES
ORLANDO, FL 328216353

FEI Number: 59-3466205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: GELLEIN, JR., RAYMOND L JR.
Address: 8801 VISTANA CENTRE DRIVE
City-St-Zip: ORLANDO, FL 328216553

Title: SVPD () Delete
Name: AVRIL, MATTHEW E
Address: 8801 VISTANA CENTRE DRIVE
City-St-Zip: ORLANDO, FL 328216553

Title: CFOT () Delete
Name: CURTIN, DALE SVPAS
Address: 8803 VISTANA CENTRE DRIVE
City-St-Zip: ORLANDO, FL 328216553

Title: SVPD () Delete
Name: WERTH, SUSAN SECTY
Address: 8803 VISTANA CENTRE DRIVE
City-St-Zip: ORLANDO, FL 328216553

Title: SVP () Delete
Name: BRODERICK, DAVID E
Address: 74-000 COUNTRY CLUB DRIVE, BLDG D
City-St-Zip: PALM DESERT, CA 92260

Title: SVP () Delete
Name: MCKNIGHT, JAMES A
Address: 8803 VISTANA CENTRE DRIVE
City-St-Zip: ORLANDO, FL 328216553

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN WERTH

SVPD

04/15/2005

Electronic Signature of Signing Officer or Director

Date