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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 03 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # P9700036915 (1)

BUENA VISTA RESORT GROUP, INC.

Principal Place of Business Mailing Address 101 E KENNEDY BLVD. 101 E KENNEDY BLVD BARNETT PLAZA SUITE 3925 BARNETT PLAZA SUITE 3925 DO NOT WRITE IN THIS SPACE TAMPA FL 33602 **TAMPA FL 33602** 3. Date Incorporated or Qualified 04/24/1997 2. Principal Place of Business 2a. Mailing Address Applied For 59<del>-344</del>096 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name FROST, MICHAEL H 101 E KENNEDY BLVD. Street Address (P.O. Box Number is Not Acceptable) **BARNETT PLAZA SUITE 3925** 83 **TAMPA FL 33602** City 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** Signature, typed or ponted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ■ Addition Change TITLE 1.1 TITLE NAME FROST, MICHAEL H 1.2 NAME 101 E KENNEDY BLVD STE 3925 STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP **TAMPA FL 33602** 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE KENNEDY, DAVID A NAME 2.2 NAME 101 E KENNEDY BLVD STE 3925 2.3 STREET ADDRESS STREET ADDRESS **TAMPA FL 33602** CITY-ST-ZIP 2. 4 City-St-ZiP DELETE 3.1 TITLE Change Addition STOLZ, ROBERT 3.2 NAME NAME 1900 BUENA VISTA DR 3.3 STREET ADDRESS STREET ADDRESS LAKE BUENA VISTA FL 32830 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE FLUHART, DARRYL NAME 4. 2 NAME 1900 BUENA VISTA DR STREET ADDRESS 4.3 STREET ADDRESS LAKE BUENA VISTA FL 32830 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ■ Addition TITLE 5.1 TITLE NAME BAGWELL, DAVID 5.2 NAME 400 AVENUE OF THE CHAMPIONS STREET ADDRESS 5.3 STREET ADDRESS PALM BEACH GARDENS FL 33418 CITY-ST-ZIP 5.4 C(TY - ST - Z)P DELETE Change Addition 6.1 TITLE TITLE NAME MOREL, FLORIAN 6.2 NAME 1900 BUENA VISTA DR 6.3 STREET ADDRESS STREET ADDRESS

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 suppliemental 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 attrachment with an address.

SIGNATURE

CITY-ST-ZIP

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LAKE BUENA VISTA FL 32830