## 2007 FOR PROFIT CORPORATION

## **ANNUAL REPORT** 1 = 1 = n = 1 DOCUMENT # P97000061322 07 MAY 25 LATE: 38 B.L. VACATION OWNERSHIP, INC. Principal Place of Business Mailing Address 7503 ATLANTIS WAY 3015 N OCEAN BLVD CELEBRATION, FL 34747 **STE 125** FORT LAUDERDALE, FL 33308 04232007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0826972 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FOSTER, REBECCA A DO NOT WRITE 3015 N. OCEAN BLVD. STE., 121 FORT LAUDERDALE, FL 33308 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. DPS TITLE LAMBERT, DANIEL NAME 2419 E. COMMERCIAL BLVD., #100 STREET ADDRESS 000104253120 06/12/07--01006--001 \*\*6295.00 FT LAUDERDALE, FL 33308 CITY-ST-ZIP DVT TITLE VERILLO, JAMES NAME MIM. STREET ADDRESS 2419 E. COMMERCIAL BLVD., #100 CITY-ST-ZIP FT LAUDERDALE, FL 33308 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

TITLE

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF

4.27.2007 454.5892449