2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2004
Secretary of State

DOCUMENT# P97000107591

Entity Name: ALL STAR VACATION HOME MANAGEMENT, INC.

Current Principal Place of Business:

7822 W. IRLO BRONSON HIGHWAY
KISSIMMEE, FL 34747

New Principal Place of Business:

Current Mailing Address:

7822 W. IRLO BRONSON HIGHWAY
KISSIMMEE, FL 34747

New Mailing Address:

FEI Number: 59-3488725 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TROVER, SUSAN K
211 INDIANA AVE.
ST. CLOUD, FL 34769 US

Name and Address of New Registered Agent:

TROVER, SUSAN K
7955 SEA PEARL CIRCLE
KISSIMMEE, FL 34747 US

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: 01/22/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: HEMPHILL, JO MARIE
Address: 14 N PALM AVE
City-St-Zip: KISSIMMEE, FL 34741

Title: P ( ) Delete
Name: TROVER, SUSAN K
Address: 211 INDIANA AVE
City-St-Zip: ST. CLOUD, FL 34769

Title: T (X) Delete
Name: TROVER, STEVEN P
Address: 2884 BLOOMING ALAMANDA LOOP
City-St-Zip: KISSIMMEE, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: TROVER, SUSAN K
Address: 7955 SEA PEARL CIRCLE
City-St-Zip: KISSIMMEE, FL 34747

Title: VP (X) Change ( ) Addition
Name: TROVER, STEVEN P
Address: 2711 FORMOSA BLVD
City-St-Zip: KISSIMMEE, FL 34747

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 K TROVER P 01/22/2004
Electronic Signature of Signing Officer or Director — Date