

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

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90163 025 ***150.00

DOCUMENT # P98000043120

1. Corporation Name

INTERNATIONAL RESORTS USA, INC.

Principal Place of Business

1031 WEST MORSE BLVD. #250
WINTER PARK FL 32789

Mailing Address

1031 WEST MORSE BLVD. #250
WINTER PARK FL 32789

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/13/1998

4. FEI Number

59-3526256

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SWANN, HADLEY & ALVAREZ, P.A.
1031 WEST MORSE BOULEVARD
SUITE 270
WINTER PARK FL 32789

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE

NAME BENSION, RONALD
STREET ADDRESS 633 INVERNESS DRIVE
CITY-ST-ZIP FLINTRIDGE CA 91011

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME DP
1.3 STREET ADDRESS Bension, Ronald
1.4 CITY-ST-ZIP 633 Inverness Drive
Flintridge CA 91011

TITLE D ☒ DELETE

NAME MCAULIFFE, TERENCE R
STREET ADDRESS 7527 OLD DOMINION
CITY-ST-ZIP MCLEAN VA 22102

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME DC
2.3 STREET ADDRESS McAuliffe, Terence R
2.4 CITY-ST-ZIP 7527 Old Dominion
McLean VA 22102

TITLE D ☐ DELETE

NAME HADLEY, RALPH V III
STREET ADDRESS 1031 WEST MORSE BLVD. #270
CITY-ST-ZIP WINTER PARK FL 32789

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D ☒ DELETE

NAME SWANN, RICHARD R
STREET ADDRESS 1031 WEST MORSE BLVD. #270
CITY-ST-ZIP WINTER PARK FL 32789

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME DVPST
4.3 STREET ADDRESS Swann, Richard R
4.4 CITY-ST-ZIP 1031 W. Morse Blvd. # 270
Winter Park, FL 32789

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 supplemental 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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-9-99

Date

407-647-2777

Daytime Phone #

CR2E034 (11/98)