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

DOCUMENT # P98000058599 1. Corporation Name

RESORT VACATION LINK, INC.

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90190 016 ***150.00



Principal Place	of Business	Mailing Address			f 3001/00f the 1818t thin Abits while opin opin shar some come come contraction and
2800 S. NOVA ROAD. UNIT 1-D SOUTH DAYTONA BEACH FL 32835 32/19		2800 S. NOVA ROAD. UNIT 1-D SOUTH DAYTONA BEACH FL 32855		32119	DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					06/30/1998
2. Principal Pt	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			593521750 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22 27		27			5. Certificate of Status Desired Fee Required
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	/	This corporation owes the current year Intangible
24	25	29 30	<u> </u>		Personal Property Tax. Yes No
	9. Name and Address of Curren	t Registered Agent		N	10. Name and Address of New Registered Agent
	OLIFORY.		81	Name	
HILL, CHERRY 2800 S. NOVA ROAD, UNIT 1-D			82	Street A	Address (P.O. Box Number is Not Acceptable)
500	TH DAYTONA BEACH FL 32835	32/17	83		
			84	City	85 Zip Code
				'	FL s z z z z z z z z z
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State on the mailiar with, and accept the obligate	of Florida. Such change was auth- tions of, Section 607.0505, Florida	orized by a Statutes	tne corpor 3.	corporation submits this statement for the purpose of changing its registered reation's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered agen			nt signature rec	equired when reinstating) DATE DATE
12.	OFFICERS AN	D DIRECTORS	13.	I-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PLESIDENT CHARGE MICHARE K. TIGHE Addition
TITLE		☐ DELETE	1.1 TITLE		MICHASA K. TIGHE
NAME			1.2 NAME		2800 S. Nova ROAD, LINIT 1-D
STREET ADDRESS				TADDRESS	Taral Davis de BEACH EL 22110
CITY-ST-ZIP		C) DELETE	1.4 CITY-5	ST-ZIP	SOUTH DAYTONA BEACH, FL 32/19 VICE-PRESIDENT -V
TITLE		☐ DELETE	2.1 TITLE	'	KAREN J. PITTILLE
NAME			2.2 NAME		BOSG ST ANDREWS CIRCLE
STREET ADDRESS				TADORESS	Anualon C 2 n 62 C
CITY-ST-ZIP		□ DELETE	2. 4 CITY-	ST- ZIP	ORLANDO, FL 32835
TITLE		☐ DELETE	3.1 TITLE		
NAME			3.2 NAME		
STREET ADDRESS				TADDRESS	
CITY-ST-ZIP		DELETE	3.4. CITY-	ST-ZIP	☐ Change ☐ Addition
TITLE			4.1 TITLE		, analiga [] manani
NAME			4.2 NAME		
STREET ADDRESS			1	TADDRESS	
CITY-ST-ZIP		☐ DELETE	4.4 CITY-5	SI-ZIP	☐ Change ☐ Addition
TITLE		□ pere ie	5.1 TITLE 5.2 NAME)	
NAME			i	T ADDRESS	
STREET ADDRESS			5.4 CITY-5		
CITY-ST-ZIP		□ DELETE	6.1 TITLE	21-ZIF	Change Addition
TITLE			62 NAME		
NAME			l	T ADDRESS	
STREET ADDRESS			6.4 CITY.		·

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 feceiver 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 appartachment with an address, with all other like empowered.

SIGNATURE 3