2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000096423

Entity Name: VACATION TITLE SERVICES, INC.

FILED Feb 20, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8801 VISTANA CENTRE DR. ORLANDO, FL 328216353 **Current Mailing Address: New Mailing Address:** P.O. BOX 22197 LAKE BUENA VISTA, FL 328302197 FEI Number: 59-3543344 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: COBD () Delete Title: () Change () Addition GELLEIN, RAYMOND L JR. Name: Name: 8803 VISTANA CENTRE DR. Address: Address: City-St-Zip: ORLANDO, FL 328216353 City-St-Zip: PD Title: Title: () Delete () Change () Addition Name: ADLER, JEFFREY A Name: 8803 VISTANA CENTRE DR. Address: Address: ORLANDO, FL 328216353 City-St-Zip: City-St-Zip: Title: Title: SVPS () Delete () Change () Addition WERTH, SUSAN Name: Name: 8803 VISTANA CENTRE DR. Address: Address: ORLANDO, FL 328216353 City-St-Zip: City-St-Zip: Title: CFOT () Delete Title: () Change () Addition CURTIN, DALE SVPAS Name: Name: Address: 8803 VISTANA CENTRE DR. Address: City-St-Zip: ORLANDO, FL 328216353 City-St-Zip: Title: **VPAS** () Delete Title: () Change () Addition CARTER, VICTORIA H Name: Name: 8803 VISTANA CENTRE DR. Address: Address: City-St-Zip: ORLANDO, FL 328216353 City-St-Zip: () Delete Title: Title: () Change () Addition SMITH, JULIÈ Name: Name: 8803 VISTANA CENTRE DR. Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 328216353

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 WERTH SVPS 02/20/2003

JARED T. FINKELSTEIN 1111 WESTCHESTER AVENUE WHITE PLAINS, NY 10604

PETER MORROW, AT 2231 E. CAMELBACK ROAD, #400 PHOENIX, AZ 85016