P99000041599

(Requestor's Name)					
(Address)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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(Document Number)					
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900037498109

Change **35.00

2004 JUN 14 PH 1: 39

TRANSMITTAL LETTER

ŤO:	: Amendment Section Division of Corporations					
SUBJ	BJECT: Resort Marketing Network, Inc. (Name of corpo	ration)				
	(Time of corpo					
DOC	CUMENT NUMBER: P99000041599					
The en	enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.				
Please	se return all correspondence concerning this matter to the fo	ollowing:				
	Silvio Cherjovsky					
	(Name of pers	on)				
	Resort Marketing Network (Name of firm/cor	npany)				
	(-13,				
<u>_</u>	P.O. Box 22376					
	(Address)					
	Lake Buena Vista, FL 32830					
	(City/state and zip code)					
For fu	further information concerning this matter, please call:					
Silvio	vio Cherjovsky (Name of person)	at (407) 355-3744 (Area code & daytime telephone number)				
	(Name of person)	(Area code & daytime telephone number)				
Enclos	osed is a \$35.00 check made payable to the Department of S	State.				
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		0502, 607,1508, or 617,1508, Florida Statutes,	this statement of in order
	itted for a corporation organized unde gistered office or registered agent, or		in order
i. The name of	the corporation: Resort Marketing N	etwork, Inc.	
2. The principal	office address: 9757 Bay Vista Esta	tes Blvd. Orlando, FL 32836	
3. The mailing a	address (if different): P.O. Box 22376	6 - Lake Buena Vista, FL 32830	
4. Date of incor	poration/qualification: 05/03/1999	Document number: P99000041599	
	d street address of the current registere rtment of State:	ed agent and registered office on file with the	
	Cherjovsky, Silvio M		-
	7002 Hiawassee Overlook Dr.		- 2
	Orlando, FL 32835		NOT YOUR
6. The name and (if changed):	d street address of the new registered a	agent (if changed) and /or registered office	
	Cherjovsky, Silvio M		PE PE
	9757 Bay Vista Estates Blvd.		I 39
		onal mailbox NOT acceptable)	D - C
	Orlando, FL 32836		_
The street addre	ess of its registered office and the street identical.	reet address of the business office of its register	ered agent, as
Such change w the board, or th	as authorized by resolution duly ado e corporation has been notified in wi	pted by its board of directors or by an officer riting of the change.	so authorized by
1.16	Signature of an officer or director)	Graciela Cherjovsky, President	title)
I hereby accept I further agree duties, and I an being filed mer been notified in	the appointment as registered agento to comply with the provisions of all and accept the obligation to reflect a change in the register withing of this change.	t and agree to act in this capacity, statutes relative to the proper and complete p tion of my position as registered agent. Or, i red office address, I hereby confirm that the c	erformance of my f this document is orporation has
	(Signature of Registered Agent)	C6/08/04	
	(Signatur∉of Registered Agent)	(Date)	
If signing on bo	chalf of an entity:		
	(Typed or Printed Name)	(Capacity)	

* * * FILING FEE: \$35.00 * * *