S 13764

(Req	uestor's Name)	
· (Addı	ess)	
(Address)		
		• •
(City/	State/Zip/Phone	e #)
	_	<u></u>
PICK-UP	WAIT	MAIL
	•	
(Busi	ness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies Certificates of Status		
Special Instructions to Fi	ling Officer	
Special instructions to Fi	mig Onicer.	
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TVISION OF CORPORATION

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SUFFICIENCY OF FILING

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C.COULLIETTE

FEB 0 1 2011

EXAMINER



ON SENAICE COMBUNA.				
ACCOUNT NO.	: I2000000195			
REFERENCE	: 658447 4813078			
AUTHORIZATION	: Spellelenan			
COST LIMIT	: \$35.00			
ORDER DATE : January 28, 2011				
ORDER TIME : 9:15 AM				
ORDER NO. : 658447-095				
CUSTOMER NO: 4813078				
				
CHANGE OF AGENT				
NAME: DISNEY VACATIONS.	ON DEVELOPMENT,			
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Matthew Young	EXT# 2962			
	EXAMINER:			

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, to ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.	his ———	-
1. The name of	the corporation: Disney Vacation Development, Inc.		
2. The principal	office address: 1390 Celebration Blvd., Celebration, FL 34747		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 11/20/1990 Document number: S13764		
	d street address of the current registered agent and registered office on file with the rtment of State:		
	Jeffrey H. Smith		
	1375 Buena Vista Drive, 4th Floor North		Take Take Take Take Take Take Take Take
	Lake Buena Vista, FL 32830	11 FE	SECE
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	1 FEB -1	N OF CO
	Jeffrey S. Craigmile	PH 3:	350
	1375 Buena Vista Drive, 4th Floor North	வ வ	AIII
	(P.O. Box NOT acceptable)		OH.
	Lake Buena Vista, FL 32830		
The street address changed will	ess of its registered office and the street address of the business office of its register be identical.	ed ager	nt,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	0	
(Signate	Marsha L. Reed, Assistant Secretary (Printed or typed name and title)		_
corporation na:	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete per and I am familiar with and accept the obligation of my position as registered agent. In giled merely to reflect a change in the registered office address, I hereby confirm to be notified in writing of this change.	forman Or, if ti n that ti	ice his he
By: On a	Craigmile 1/21/11		_
OM	tradure of Registered Aponty (Date)		- ,
If signing on be	half of an entity:		
	Typed or Printed Name)	•	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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