

March 26, 1997

VIA DHL EXPRESS

Florida Secretary of State Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

Dear Sir/Madam:

Reference: Affidavit of Resignation of Officer and/or Director

Enclosed for filing is an original Affidavit of Resignation of Officer and/or Director in which Francis A. Cardinal resigns as an officer of VCH Communications, Inc. Also enclosed is a check in the amount of \$35.00 for the filing fee.

If you have any questions on the above, please call me at (407) 239-3000, ext. 3099, or direct at (407) 239-3099.

Sincerely yours,

VISTANA DEVELOPMENT, LTD.

Andrea E. Johnson

Andrea E. Johnson, CLA Manager of Legal Services

**Enclosures** 

cc: Susan B. Werth, Esq.

LR.60.06.02

Of resig.

VS HAR 3 1 1997

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DIVISION OF CORPORATIONS

P.O. Box 22197, Lake Buena Vista, FL 32830-2197, (407) 239-3000 8800 Vistana Centre Drive, Orlando, Florida 32821-6353

## Florida Department of State, Secretary of State Division of Corporations

AFFIDAVIT OF RESIGNATION OF OFFICER AND/OR DIRECTOR

STATE OF FLORIDA

COUNTY OF ORANGE

- STATE OF THE STATE I, FRANCIS A. CARDINAL, after being duly sworn, state that to the best of my knowledge, information and belief, and under the penalties of perjury, the following is true and correct:
- I, FRANCIS A. CARDINAL, hereby resign as Vice President of VCH COMMUNICATIONS, INC., a Florida corporation;

That the corporation has been notified in writing of the resignation.

Sworn to and subscribed before me this 2! day of March, 1997.

Joy D. Theiss

My Commission Expires:

Up OFFICIAL NOTARY SEAL JOY D THEISS OMMISSION NUMBER CC413797 MY COMMISSION EXP. NOV. 6,1998

## STATE OF FLORIDA CE OF THE COMPTROLLER PLICATION FOR REFUND

In part; "Applications for refunds as provided in this section shall be filed with

-	all be barred. Three years is generally interpreted as meaning three years from the date of payment in the Comptroller has delegated the suthority to accept applications for refund to the unit of State initially collected the money.
Section	ovisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or ***********************************
Name:	WTH POINT MARINE EIN or SS#: GS- \$298819
Address: _	21346 SAINT ANDREWS BLUR, SUITE 219
_	Baca Redon, FL 33433
	0.00 Date Paid
Reason for claim	OVERPAYMENT OF REINSTATEMENT FEES
	TERESA BROWN/REINSTATEMENTS
S89159	SOUTH -SOTUP POINT MARINE & INDUSTRIES, INC.
Certified true as	nd correct this 16 tday of Man 6, 19 97.
***	ture Maddeleran Pres South POINT MARIN
Signat	
* Must be compl	eted if authority is other Linan Section 215.26, Florida Statutes.
	For Agency Use Only
Agency recomme	nds approval of above claim and submits the following information to
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