2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

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Mar 15, 2007 8:00 an Secretary of State
03-15-2007 90016 036 ***158.75

DOCUMENT # S98549 WILSON RESORT MANAGEMENT CORP. 40035906 Principal Place of Business Mailing Address 8505 W. IRLO BRONSON MEMORIAL HWY. 8505 W. IRLO BRONSON MEMORIAL HWY. KISSIMMEE, FL 34747-8201 KISSIMMEE, FL 34747-8201 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02062007 CR2E034 (12/06) Chg-P Applied For City & State City & State 4. FEI Number 59-3095499 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LOWER, BRIAN T Street Address (P.O. Box Number is Not Acceptable) 8505 WEST IRLO BRONSON MEMORIAL HIGHWAY KISSIMMEE, FL 34747-8201 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE: Beg stored Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. PCEO THE □ Delete TITLE ☐ Change Addition HARRILL, DON L NAME NAME See Attached List of Officers. STHEET ADDRESS 8505 W. IRLO BRONSON MEMORIAL HWY STREET ADDRESS KISSIMMEE, FL 34747 CITY-ST-ZIP CUTY-S1-7IP DVP TITLE ☐ Delete TITLE ☐ Change ☐ Addition WILSON, ROBERT A NAME NAME 8700 TRAIL LAKE DR., STE 300 STREET ADDRESS STREET ADDRESS MEMPHIS, TN 38125 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition WILSON, C. KEMMONS JR. NAME NAME STREET ADDRESS 8700 TRAIL LAKE DR., STE 300 STREET ADDRESS MEMPHIS, TN 38125 CITY-ST-ZIP CITY-ST-ZIP ☐ Defete HILE TITLE SRVS ☐ Change ☐ Addition LOWER, BRIAN T NAME NAME STREET ADDRESS STREET ADDRESS 8505 WEST IRLO BRONSON MEMORIAL HWY. CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE, FL 34747 TITLE ☐ Delete TITLE Change Addition NAME MOORE, BETTY W NAME STREET ADDRESS 8700 TRAIL LAKE DR., STE 300 STREET ADDRESS CHY-ST-ZIP MEMPHIS, TN 38125 CITY-ST-ZIP Delete Change Addition THE TITLE WEST, CAROLE WILSON NAME NAML 8700 TRAIL LAKE DR., STE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MEMPHIS, TN 38125

12. I hereby certify that the information supplied with tindicated on this eport or supplemental report is of the corporation or the receiver or trustee empoy changed, or on an attachment with an address. is filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information up and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director upsed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if thall other like empowered.

SIGNATURE:

Brian T. Lower SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*3-9-*07

407.905.1904

Daytime Phone #

ATTACHMENT 40035906 #\$98549

WILSON RESORT MANAGEMENT CORP. (FEI # 59-3095499)

8700 Trail Lake Dr. West, Suite 300 Memphis, TN 38125

Spence Wilson	D/C
Robert A. Wilson	D/VP
C. Kemmons Wilson, Jr.	D/VP
Betty Wilson Moore	D
Carole Wilson West	D
William R. Batt	Asst. T
Gary McClain	Asst. S

8505 West Irlo Bronson Memorial Highway Kissimmee, FL 34747

Don L. Harrill	P/CEO
Brian T. Lower	Sr. VP/S
Thomas R. Nelson	Exec.VP/CFO/T
Ron Juneman	Sr. VP
Ralph Bailey	Sr. VP
Michael Thompson	VP
Debra A. Cohen	Asst. VP
Scott Nassar	Sr. VP

D=Director, C=Chairman, P=President, CEO=Chief Executive Officer, CFO=Chief Financial Officer, Exec. VP=Executive Vice President, Sr. VP=Senior Vice President, VP=Vice President, S=Secretary, T=Treasurer, Asst.=Assistant