2000 UNIFORM BUSINESS REPORT (UBR)

RHED **DOCUMENT # V48809** Apr 26, 2000 8:00 am Secretary of State 1. Entity Name JEM RESORTS MANAGEMENT SERVICES, INC. 04-26-2000 90059 027 ***150.00 Principal Place of Business Mailing Address 2200 E. IRLO BRONSON 2200 E. IRLO BRONSON SUITE 104-A SUITE 104-A KISSIMMEE FL 34744 KISSIMMEE FL 34744-4410 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE JUITE City & State Applied For 4. FEI Number City & State 59-3137578 Not Applicable Zio Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name VASQUEZ, JULIAN Street Address (P.O. Box Number is Not Acceptable) lo Bronson 2200 E. IRLO BRONSON #104A KISSIMMEE FL 34744 SSIMMER 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. SIGNATURE (NOTE: Registered Agent sig FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. **Addition** TITLE Change TITLE Delete D VASQUEZ, JULIAN NAME NAME SALLS, SCOTT STREET ADDRESS STREET ADDRESS 2200 E. IRLO BRONSON 2707 FOREST VIEW LANE CITY-ST-ZIP CITY-ST-ZIP **KISSIMMEE FL 34744** KISSIMMEE, FL 34744 X Change ☐ Addition ☐ Delete TITLE S/T/D TITLE MICHAEL, AGOMBAR G NAME AGOMBAR, MICHAEL NAME STREET ADDRESS 743 COUNTRY WOODS 743 COUNTRY WOODS CIRCLE STREET ADDRESS CITY-ST-ZIP KISSIMMEE FL 34744 CITY-ST-ZIP KISSIMMEE -- FL 34744 Change ☐ Addition ☐ Delete TITLE TITLE SILLS, LARA J NAME SILLS, LARA MAYO NAME STREET ADDRESS 2707 FOREST VIEW LANE 2200 E. IRLO BRONSON STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL 34744 KISSIMMEE, FL 34744 Change ☐ Addition ☐ Delete TITLE COMBEN, ROY NAME COMBEN, ROY NAME 866 COUNTRY CROSSING CT. STREET ADDRESS 866 COUNTRY CROSSING COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL KISSIMMEE, FL 34744 ☐ Addition Change Delete 7 TITLE TITLE NAME ELLIOTT, WARD J NAME STREET ADDRESS 2200 E. IRLO BRONSON STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL 34744 **CBTS** TITLE Change Addition Delete TITLE PARKE, ALAN G NAME NAME STREET ADDRESS STREET ADDRESS 30 GREENVIEW WAY CITY-ST-ZIP

indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

13. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

SIGNATURE: .

UPPER MONTCLAIRE NJ 07043

CITY-ST-ZIP