2017 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# S98549

Entity Name: WILSON RESORT MANAGEMENT CORP.

FILED Aug 08, 2017 **Secretary of State** CC1520658426

Current Principal Place of Business:

8505 W. IRLO BRONSON MEMORIAL HWY.

KISSIMMEE, FL 34747-8201

Current Mailing Address:

8505 W. IRLO BRONSON MEMORIAL HWY. KISSIMMEE, FL 34747-8201

FEI Number: 59-3095499 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

HWY.

Title Title DVP

WILSON, ROBERT A WILSON, C. KEMMONS JR. Name Name Address 8700 TRAIL LAKE DR., STE 300 Address 8700 TRAIL LAKE DR., STE 300

City-State-Zip: MEMPHIS TN 38125 MEMPHIS TN 38125 City-State-Zip:

Title D Title **EVPS**

Name MOORE, BETTY W LOWER, BRIAN T Name

8505 WEST IRLO BRONSON Address 8700 TRAIL LAKE DR., STE 300 Address

MEMORIAL HWY.

MEMPHIS TN 38125 City-State-Zip: KISSIMMEE FL 34747 City-State-Zip:

Title EVP/CEO Title D

Name NELSON, THOMAS R Name WEST, CAROLE WILSON

Address 8505 W. IRLO BRONSON MEMORIAL Address

8700 TRAIL LAKE DR., STE 300 HWY.

City-State-Zip: KISSIMMEE FL 34747-8201 City-State-Zip: MEMPHIS TN 38125

Title SR. VP SR. VP Title

THOMPSON, MICHAEL J Name Name BAILEY, RALPH

Address 8505 W. IRLO BRONSON MEMORIAL Address 8505 W. IRLO BRONSON MEMORIAL

HWY.

KISSIMMEE FL 34747-8201 KISSIMMEE FL 34747-8201 City-State-Zip: City-State-Zip:

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

08/08/2017 SIGNATURE: BRIAN T. LOWER EVP/S

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Name

Title ASST. VP Title SR. VP/CFO/TREASURER

Name BRIGGS, CHRISTINA Name DIXON, SONYA

8505 W. IRLO BRONSON MEMORIAL HWY. 8505 W. IRLO BRONSON MEMORIAL Address Address

 HWY

KISSIMMEE FL 34747-8201 City-State-Zip: City-State-Zip: KISSIMMEE FL 34747

Title DIRECTOR/C **PRESIDENT** Title WILSON, SPENCE

Name WILSON, JR., SPENCE Address 8505 W. IRLO BRONSON MEMORIAL HWY.

Address 8505 W. IRLO BRONSON MEMORIAL City-State-Zip: KISSIMMEE FL 34747-8201 HWY.

City-State-Zip: KISSIMMEE FL 34747-8201