

1.) CORPORATION NAME:

DIAMOND RESORTS INTERNATIONAL MARKETING, INC.

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1294059**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10600 W CHARLESTON BLVD

CITY/ST/ZIP: LAS VEGAS, NV 89135

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: DAVID F PALMER TITLE: PRESIDENT & CEO ADDRESS: 10600 W CHARLESTON BLVD CITY/ST/ZIP/CO: LAS VEGAS, NV 89135</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: HOWARD LANZNAR TITLE: VICE PRESIDENT ADDRESS: 10600 W CHARLESTON BLVD CITY/ST/ZIP/CO: LAS VEGAS, NV 89135</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: DAVID WOMER TITLE: VICE PRESIDENT ADDRESS: 10600 W CHARLESTON BLVD CITY/ST/ZIP/CO: LAS VEGAS, NV 89135</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: YANNA HUANG TITLE: TREASURER ADDRESS: 10600 W CHARLESTON BLVD CITY/ST/ZIP/CO: LAS VEGAS, NV 89135</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: JARED FINKELSTEIN TITLE: SECRETARY & DIR ADDRESS: 10600 W CHARLESTON BLVD CITY/ST/ZIP/CO: LAS VEGAS, NV 89135</p>	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
<p>NAME: C. ALAN BENTLEY TITLE: CFO ADDRESS: 10600 W CHARLESTON BLVD CITY/ST/ZIP/CO: LAS VEGAS, NV 89135</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR

NAME: LISA GANN TITLE: DIRECTOR ADDRESS: 10600 W CHARLESTON BLVD CITY/ST/ZIP/CO: LAS VEGAS, NV 89135	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: KEITH HOLMES TITLE: DIRECTOR ADDRESS: 10600 W CHARLESTON BLVD CITY/ST/ZIP/CO: LAS VEGAS, NV 89135	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Michael Shalmy TITLE: ASST SECRETARY ADDRESS: 10600 W. Charleston Blvd. CITY/ST/ZIP/CO: Las Vegas, NV 89135	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: Alex Olsansky TITLE: ASST SECRETARY ADDRESS: 10600 W. Charleston Blvd. CITY/ST/ZIP/CO: Las Vegas, NV 89135	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ DAVID F PALMER _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DAVID F PALMER, PRESIDENT & CEO _____ PRINTED NAME AND CORPORATE TITLE
5/28/2014 _____ DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	