

1.) CORPORATION NAME:

DUE DATE: **2/29/2012**

Festiva Resorts Adventure Club Members' Association, Inc.

SCC ID NO: **F1781956**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

NATIONAL REGISTERED AGENTS INC

4001 North Ninth Street, Suite 227

ARLINGTON, VA 22203

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

SC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE VANCE GAP ROAD

CITY/ST/ZIP: ASHEVILLE, NC 28805-

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.

NAME: TOBIAS A WEAS
TITLE: PRESIDENT/DIR
ADDRESS: ONE VANCE GAP RD
CITY/ST/ZIP/CO: ASHEVILLE, NC 28805-

OFFICER DIRECTOR

NAME: WILL HORTON
TITLE: VP/DIRECTOR
ADDRESS: ONE VANCE GAP RD
CITY/ST/ZIP/CO: ASHEVILLE, NC 28805-

OFFICER DIRECTOR

NAME: YVETTE S SMITH
TITLE: SEC/TREA
ADDRESS: ONE VANCE GAP ROAD
CITY/ST/ZIP/CO: ASHEVILLE, NC 28805-

OFFICER DIRECTOR

NAME: DONALD K CLAYTON
TITLE: DIRECTOR
ADDRESS: ONE VANCE GAP RD
CITY/ST/ZIP/CO: ASHEVILLE, NC 28805-

OFFICER DIRECTOR

NAME: HERBERT H PATRICK, JR
TITLE: DIRECTOR
ADDRESS: ONE VANCE GAP RD
CITY/ST/ZIP/CO: ASHEVILLE, NC 28805-

OFFICER 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.

<u>/s/ TOBIAS A WEAS</u>	<u>TOBIAS A WEAS, PRESIDENT/DIR</u>	<u>1/5/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.