

**STATE OF NEVADA  
DEPARTMENT OF BUSINESS AND INDUSTRY  
REAL ESTATE DIVISION**

3300 W. Sahara Ave., Suite 350, Las Vegas, Nevada 89102 \* (702) 486-4033  
e-mail: realest@red.nv.gov \* http://red.nv.gov/

**DISCLOSURE STATEMENT REQUIRED BY NRS119A.534**

**Any and all managers who enter into or renew an agreement that must comply with the provisions of subsection 3 of NRS 119A.530 must submit to the relevant association and to the Nevada Real Estate Division a disclosure statement that contains the information set forth below with respect to any arrangement made by the manager or an affiliate of the manager.**

**This Disclosure Statement must be submitted annually. The initial submittal must be made no later than 10 days of the date of management agreement is fully executed by all parties and thereafter annually, 120 days prior to the automatic renewal date of the management agreement. The required information and prescribed format for this information is as set forth below. This form may be retyped if additional space is required as long as the information required by NRS 119A.540 is accurate and complete.**

1. Describe any arrangements made by the manager or its affiliate regarding the resale of timeshare interests on behalf of the timeshare association or its members.

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2. Describe all measures and actions manager or its affiliates will take to collect assessments and foreclose on liens on behalf of the association or its members.

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3. Describe any and all processes and procedures for exchange or rental of time shares owned by the association or its members.

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4. Describe if and how the use of the names of the members of the association may be used for purposes unrelated to the duties of the association as set forth in the time share instrument, project documents and NRS 119A.

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The signatory below declares under penalty of perjury that the information set forth in this Disclosure Statement is true and correct. The signatory must be the manager or an authorized representative of the manager. [NOTE: Any and all terms used herein are as defined in NRS and NAC 119A.]

"MANAGER"

Dated: \_\_\_\_\_

By: \_\_\_\_\_  
           Manager                    Authorized Representative

\_\_\_\_\_  
Please Print Name