

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 625207

FILED
Feb 05, 2009
Secretary of State

Entity Name: LAS OLAS RESORTS, INC.

Current Principal Place of Business:

5100 OCEAN BEACH BLVD.
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

5100 OCEAN BEACH BLVD.
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 59-1930324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATEY, THOMAS W.
6318 DONEGAL DR.
ORLANDO, FL 32811 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GETTEL, JOHN J
Address: 656 SMOKERISE BLVD
City-St-Zip: LONGWOOD, FL

Title: D () Delete
Name: GEORGAS, JOHN L
Address: OCEAN BLVD
City-St-Zip: PONTE VEDRA, FL

Title: PTD () Delete
Name: MATEY, THOMAS W
Address: 6318 DONEGAL DRIVE
City-St-Zip: ORLANDO, FL 00000,

Title: DV () Delete
Name: MATEY, VIOLET A.
Address: 5100 OCEAN BEACH BLVD
City-St-Zip: COCOA BEACH, FL

Title: D () Delete
Name: SMITH, MATTHEW
Address: 325 CATHEDRAL OAKES DR
City-St-Zip: VERO BEACH, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS W. MATEY

PTD

02/05/2009

Electronic Signature of Signing Officer or Director

Date