

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 689881

FILED
Apr 23, 2007
Secretary of State

Entity Name: 5617 WEST COLONIAL CORPORATION

Current Principal Place of Business:

% RALPH J KORANSKY
5617 WEST COLONIAL DR
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

% RALPH J KORANSKY
543 TIMBER RIDGE DRIVE
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-2031083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KORANSKY, RALPH
543 TIMBER RIDGE DRIVE
LONGWOOD, FL 32779 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: ST () Delete
Name: KORANSKY, YVONNE,
Address: 543 TIMBER RIDGE DR.
City-St-Zip: LONGWOOD, FL

Title: P () Delete
Name: KORANSKY, RALPH J,
Address: 543 TIMBER RIDGE DR.
City-St-Zip: LONGWOOD, FL

Title: M () Delete
Name: CONTARSY, GEORGE,
Address: 10909 HOT OAK COURT
City-St-Zip: LAS VEGAS, NV 89134

Title: M () Delete
Name: CONTARSY, JOYCE,
Address: 10909 HOT OAK COURT
City-St-Zip: LAS VEGAS, NV 89134

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: RALPH KORANSKY

PR

04/23/2007

Electronic Signature of Signing Officer or Director

_____ Date