2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 28, 2008 8:00 am Secretary of State **DOCUMENT #754033** 04-28-2008 90346 039 ****61.25 CENTRAL FLORIDA HOTEL&LODGING ASSOCIATION, INC. Principal Place of Business Mailing Address 7380 SAND LAKE RD. 7380 SAND LAKE RD. **STE 300 STE 300** ORLANDO, FL 32819 ORLANDO, FL 32819 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04182008 Chg-NP CR2E037 (12/06) Applied For City & State City & State 4. FEI Number 59-2075117 Not Applicable Zip Country Country \$8.75 Additional П 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MALADECKI, RICHARD J Street Address (P.O. Box Number is Not Acceptable) 7380 SAND LAKE RD STE 300 ORLANDO, FL 32819 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature requi 9. Election Campaign Financing Make check payable to \$5.00 May Be Filing Fee Is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. IPCD TITLE Detete TITE F Change | Addition ENGFER, PAT NAME NAME 7380 SAND LAKE ROAD, STE 300 STREET ADDRESS STREET ADDRESS ORLANDO, FL 32819 CITY-ST-7P CITY-ST-ZIP TPCD CD Change Delete TITLE Addition | TITLE Havenstein, Greg 7380 Send Lake Rd, Ste 300 HAUENSTEIN, GREG STREET ADDRESS 7380 SAND LAKE ROAD STE 300 STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32819 CITY-ST-ZIP Orl-1. FL 32819 VCD CD **K** Change Addition □ Detete BUE TITLE Sherman, Laura SHERMAN, LAURA NAME NAME 7380 Sand Lake Rd, Ste 300 7380 SAND LAKE ROAD, STE 300 STREET ADDRESS STREET ADDRESS orlando, FL 34819 CITY-ST-ZIP CITY-ST-7/P ORLANDO, FL 32819 SD ☐ Detete ππε ☐ Change **Addition** TITLE King, David 7380 Sand Lake Rd, Ste 300 MALADECKI, RICHARD J NAME MALEE STREET ADORESS 7380 SAND LAKE ROAD, STE 300 STREET ADDRESS FL 32819 CITY-ST-ZIP ORLANDO, FL 32819 CITY-ST-7IP orland. ATD ☐ Change TITI F C Delete TITLE Addition Winjum, Duane 7380 Send Lake Rd, Ste 300

FILED

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the compration or the receiver or insiste empowered to execute this report by Chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if

NAME

TITLE

NAME

☐ Detete

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

UCD

7380

Tang, Paul

Orlando, FL 32819

Send Lake Rd, Ste 300

FL 32819

☐ Change

Addition

CITY-ST-ZIP

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR IDRECTOR	Desie	Daytime Phone #
SIGNATURE: RIMANIECLE	4/18/08	407-313-5000
changed, or on an attachment with an address, with all other like empowered.		

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

1. Entity Name	NTRAL FLORIDA HOTEL&LODGING ASSOCIATION.			ATTACHMENT					
Principal Place of E 7380 SAND LAKE STE 300 ORLANDO, FL 32	RD.	Mailing Address 7380 SAND LAKE RD. STE 300 ORLANDO, FL 32819	US		11100	11.54/2 -			
Principal Place of Business - No P.O. Box # 3. Mading Address				TUO 84504					
	Suite, Apt. #, etc. Suite, Apt. #, etc.			04182008 Chg-NP CR2E037 (12/06)					
City & State		City & State			4. FEI Number 59-2075117		plied For ot Applicable		
Zip	Country	Zip	Cou	niry	5. Certificate of Status Desired \$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent Name				Name	7. Name and Address of New Registered Agent				
MALADECKI, RICHARD J 7380 SAND LAKE RD			- ·	Street Address (P.O. Box Number is Not Acceptable)					
STE 300 ORLANDO, FL	. 32819			<u>-</u>					
				City		FL Zip Cod	e		
	ed entity submits this statement for of registered agent.	the purpose of changing it	s registere	d office or register	red agent, or both, in the State	e of Florida. I am familiar with,	and accept		
the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remistating) DATE									
Filling Fee is \$61.25 9. Election Cempaign Financing \$5.00 May Be Due by May 1, 2008 9. Election Cempaign Financing Added to Fees Make check payable to Florida Department of State									
TITLE IPC	OFFICERS AND DIR		11.	1 = =		FFICERS AND DIRECTORS IN			
NAME EN			NAME			☐ Change	Addition		
- 1				ST-ZP Or	1980				
TITLE CD		☐ Delete	TITLE	40	> \	Change	Addition		
STREET ADDRESS 738	UENSTEIN, GREG 30 SAND LAKE ROAD, STE 30	00		ET ADDRESS 73	anda, Jeff 80 Sand Lake R	d, Ste 3∞			
TITLE VC	D 22819	☐ Defete	TITLE		-lando FL 3	<u>よ809′</u> □ Change	☐ Addition		
	ERMAN, LAURA 30 SAND LAKE ROAD, STE 30	20	NAME STREE	ET ADDRESS					
I .	LANDO, FL 32819			SI-20P					
TITLE P NAME MA	LADECKI, RICHARD J	☐ Delete	TITLE Name	i	· -	☐ Change	Addition		
I .	80 SAND LAKE ROAD, STE 30 LANDO, FL 32819	00		et adoress -ST-ZIP					
TITLE		☐ Delete	ITTLE	I .		☐ Change	Addition		
STREET ADDRESS C/TY-ST-Z/P				ET ADORESS -ST-ZIP					
TITLE		Delete	IIILE			☐ Change	Addition		
NAME STREET ADORESS			NAME STREE	ET ADORESS					
CITY-ST-ZIP				ST-ZIP					
12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.									
SIGNATURE: ROMAN 2017 SIGNATURE: PROPRIED IN THE OF PROPRIED IN THE OF SEGUND OFFICER OF DIRECTOR SIGNATURE: Date Descriptor Propried I									