## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#756240**

Apr 14, 2009 Secretary of State

Entity Name: KISSIMMEE-BOAT-A-CADE, INC.

Current Principal Place of Business: New Principal Place of Business:

509 W. LAKE SUMMIT DR. WINTER HAVEN, FL 33884 US

Current Mailing Address: New Mailing Address:

PO BOX 560217

ORLANDO, FL 32856 US

FEI Number: 59-1234084 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ZINSMEISTER, PAM 509 W. LAKE SUMMIT DR. WINTER HAVEN, FL 33884 US

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:

OKE. \_\_\_\_\_

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

ZINSMEISTER, TOM

509 W. LAKE SUMMIT DRIVE

WINTER HAVEN, FL 33884

(X) Change ( ) Addition

 Title:
 VP ( ) Delete
 Title:

 Name:
 GRAY, DAVID
 Name:

 Address:
 1540 HOBSON STREET
 Address:

 City-St-Zip:
 LONGWOOD, FL 32750
 City-St-Zip:

 Title:
 PSD () Delete
 Title:
 PSD (X) Change () Addition

 Name:
 LAPIDO, KAREN
 Name:
 BARO, ANA

 Address:
 6410 ADAM ST
 Address:
 5921 TARAWOOD DRIVE

City-St-Zip: ST CLOUD, FL 34744 City-St-Zip: ORLANDO, FL 32819

Title: PSD ( ) Delete Title: PSD (X) Change ( ) Addition Name: BAVARO, CAROLEE BAVARO, CAROLEE

 Address:
 581 S. BINION ROAD
 Address:
 581 S. BINION ROAD

 City-St-Zip:
 APOPKA, FL 32703
 City-St-Zip:
 APOPKA, FL 32703

Title: D ( ) Delete Title: VP (X) Change ( ) Addition Name: ZINSMEISTER, TOM Name: BAVARO, NICK

 Name:
 ZINSMEISTER, TOM
 Name:
 BAVARO, NICK

 Address:
 509 W. LAKE SUMMIT DR.
 Address:
 581 S. BINION ROAD

 City-St-Zip:
 WINTER HAVEN, FL 33884
 City-St-Zip:
 APOPKA, FL 32703

Title: P ( ) Delete Title: T (X) Change ( ) Addition Name: MOFFITT, RON Name: ZINSMEISTER, PAM

 Name:
 MOFFITT, RON
 Name:
 ZINSMEISTER, PAM

 Address:
 815 S. OSCEOLA AVE.
 Address:
 509 W. LAKE SUMMIT DRIVE

 City-St-Zip:
 ORLANDO, FL 32901
 City-St-Zip:
 WINTER HAVEN, FL 33884

Title: T ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 BECKER, CHERYL
 Name:
 GRAY, DAVID

 Address:
 1170 E FOWLER DR
 Address:
 1540 HOBSON STREET

 City-St-Zip:
 DELTONA, FL 32725
 City-St-Zip:
 LONGWOOD, FL 32750

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOM ZINSMEISTER PRES 04/14/2009

Electronic Signature of Signing Officer or Director

Date