2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756240

FILED Jan 04, 2010 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 509 W. LAKE SUMMIT DR. ORLANDO, FL 32856 US WINTER HAVEN, FL 33884 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: BAVARO, CAROLEE Address: 581 S. BINION ROAD City-St-Zip: APOPKA, FL 32703

Title: VP

Name: BALDWIN, DANIEL
Address: 640 VISCAYA AVENUE
City-St-Zip: ORLANDO, FL 32839

Title: RS

Name: BARO, ANA

Address: 5921 TARAWOOD DRIVE City-St-Zip: ORLANDO, FL 32819

Title:

Name: ZINSMEISTER, PAM

Address: 509 W. LAKE SUMMIT DRIVE City-St-Zip: WINTER HAVEN, FL 33884

Title:

Name: ZINSMEISTER, TOM
Address: 509 W. LAKE SUMMIT DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: [

Name: GRAY, DAVID

Address: 1540 HOBSON STREET City-St-Zip: LONGWOOD, FL 32750

I hereby 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 all other like empowered.

SIGNATURE: PAM ZINSMEISTER TREA 01/04/2010