2005 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 08, 2005 8:00 am **DOCUMENT # F04000005432** Secretary of State 1. Entity Name 03-08-2005 90188 026 ***150.00 ORLANDO BREEZE RESORT CLUB, INC. Principal Place of Business Mailing Address 1221 RIVER BEND, SUITE 120 1221 RIVER BEND, SUITE 120 DALLAS, TX 75247 DALLAS, TX 75247 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-P 02212005 CR2E034 (10/03) City & State City & State 4. FELNumber 55-0883100 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CAPITOL CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 1333 N. DUVAL STREET TALLAHASSEE, FL 32303 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature regulred when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. DT Addition TITLE ☐ Delete TITLE Robert G. Levy CALLAWAY, DANA NAME 18270 Singing Wood Lane STREET ADDRESS 640 E. ROCKFORD STREET ADDRESS BRANSON, MO 65616 CITY-ST-ZIP CITY-ST-ZIP Flint, TX 75762 Delete TITLE ☐ Change ☐ Addition CEARLEY, SANDRA NAME NAME STREET ADDRESS P.O. BOX 358 STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75221 CITY-ST-ZIP DVP ☐ Delete TITLE ☐ Addition TITLE ☐ Change NAME HINCH, ELIZABETH STREET ADDRESS 18270 SINGING WOOD LANE STREET ADDRESS CITY-ST-ZIP FLINT, TX 75762 CITY-ST-ZIP ☐ Delete Addition RASSO, MARIE NAME NAME STREET ADDRESS RT. 4 BOX 910 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KIMBERLING CITY, MO 65686 Change Delete ■ Addition TITLE TITLE NAME SPIEWAK, STEVE NAME STREET ADDRESS 190 MEADOW STREET STREET ADDRESS CITY-ST-ZIP SOUTH LEE, MA 01260 CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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:

Sandra G. Cearley. Secretary 2/21/05 214-631-1166

Sandra G. Cearley, Secretary 2/21/05 214-631-1166
OF SIGNING OFFICER OR DIRECTOR
Dale Daylimo Phone * x.2214

FILED