

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003327

FILED
Apr 18, 2008
Secretary of State

Entity Name: HERSCEND FAMILY ENTERTAINMENT CORPORATION

Current Principal Place of Business:

2800 W. 76 COUNTRY BLVD
BRANSON, MO 65616

New Principal Place of Business:

Current Mailing Address:

2800 W. 76 COUNTRY BLVD
BRANSON, MO 65616

New Mailing Address:

FEI Number: 44-0663043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD () Delete
Name: MANBY, JOEL
Address: 5445 TRIANGLE PKWY STE 200
City-St-Zip: NORCROSSE, GA 30092

Title: SD () Delete
Name: HERSCEND, CHRISTOPHER
Address: 5445 TRIANGLE PKWY STE 200
City-St-Zip: NORCROSS, GA 30092

Title: V () Delete
Name: BAKER, RICK
Address: 1020 DOLLYWOOD LANE
City-St-Zip: PIGEON FORGE, TN 37863

Title: V () Delete
Name: TODD, RICK
Address: 2800 W 76 COUNTRY BLVD
City-St-Zip: BRANSON, MO 65616

Title: V () Delete
Name: RODE, JERRY
Address: 5445 TRIANGLE PKWY STE 200
City-St-Zip: NORCROSS, GA 30091

Title: V () Delete
Name: YOUNGBLOOD, RHONDA
Address: 2800 W 76 COUNTRY BLVD
City-St-Zip: BRANSON, MO 65616

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
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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 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: CHRISTOPHER HERSCEND

SD

04/18/2008

Electronic Signature of Signing Officer or Director

Date