## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000002094

Entity Name: RESORT WIFI OPERATING CORP.

FILED Apr 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Busin	

% GORDON P. WILLIAMS, JR. ONE AT&T WAY 6363 NORTH STATE HIGHWAY 161, SUITE 650 **ROOM 4A248** 

IRVING, TX 75038 BEDMINSTER, NJ 07921

**Current Mailing Address:** 

% GORDON P. WILLIAMS, JR ONE AT&T WAY 6363 NORTH STATE HIGHWAY 161, SUITE 650 **ROOM 4A248** 

IRVING, TX 75038 BEDMINSTER, NJ 07921

FEI Number: 20-8037529 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:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

New Mailing Address:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

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

VUCINA, DAVID WISKOCIL, ANGIE Name: Name:

6363 N STATE HIGHWAY 161, SUITE 650 4509 FREIDRICH LANE Address: Address: AUSTIN, TX 78744 City-St-Zip: IRVING, TX 75038 City-St-Zip:

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

Name: WILLIAMS, GORDON P JR. Name: ALLEN, CHARLES P 6363 N STATE HIGHWAY 161, SUITE 650 208 S AKARD STREET Address: Address: IRVING, TX 75038 DALLAS, TX 75202 City-St-Zip: City-St-Zip:

Title: Title: TD ( ) Delete CFO (X) Change ( ) Addition

KIELEY, KEN CRAFT, ALLEN Name: Name:

6363 N STATE HIGHWAY 161, SUITE 650 530 MCCULLOUGH AVENUE Address Address:

City-St-Zip: IRVING, TX 75038 City-St-Zip: SAN ANTONIO, TX 78215

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: CHARLES P. ALLEN 04/10/2009 Τ