## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F71244

Entity Name: COLD SPRINGS VILLAGE, INC.

**FILED** Feb 06, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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149 BROCK STREET, BOX 100 149 BROCK STREET

NOM 2M0 CA THAMESFORD, ONTARIO, **BOX 100** 

THAMESFORD, ON NOM 2M0 CA

**Current Mailing Address:** New Mailing Address:

149 BROCK STREET, BOX 100 149 BROCK STREET

THAMESFORD, ONTARIO, NOM 2M0 CA **BOX 100** 

THAMESFORD, ON NOM 2M0 CA

FEI Number: 59-2274185 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:

DIVINE, RUSSELL W 24 SOUTH ORANGE AVE. ORLANDO, FL 32801

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

YOUNG, RICK YOUNG, RICK Name: Name:

149 BROCK STREET, BOX 100 149 BROCK STREET, BOX 100 Address: Address:

City-St-Zip: THAMESFORD, ONTARIO, NOM 2MO CA City-St-Zip: THAMESFORD, ON NOM 2MO CA

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

FORTNEY, TERESA Name: Name: FORTNEY, TERESA

149 BRACK STREET, BOX 100 149 BROCK STREET, BOX 100 Address: Address: THAMESFORD, ONTARIO, NOM 2M0 CA THAMESFORD, ON NOM 2M0 CA City-St-Zip: City-St-Zip:

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

CRAM, BRIAN CRAM, BRIAN Name: Name:

149 BROCK STREET #100 149 BROCK STREET BOX 100 Address: Address: THAMESFORD, ONTARIO, CA NOM 2M0 CA City-St-Zip: THAMESFORD, ON NOM 2M0 CA

City-St-Zip:

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

WAGTER, MICHELLE WAGTER, MICHELLE Name: Name:

Address: 149 BROCK STREET, BOX 100 Address: 149 BROCK STREET, BOX 100 City-St-Zip: City-St-Zip: THAMESFORD, ONTARIO, NOM 2M0 CA THAMESFORD, ON NOM 2M0 CA

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHELLE WAGTER TS 02/06/2007