2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2007
Secretary of State

DOCUMENT# F96000003812

Entity Name: CIRQUE DU SOLEIL ORLANDO, INC.

Current Principal Place of Business:

980 KELLY JOHNSON DRIVE
LAS VEGAS, NV 89119 US

New Principal Place of Business:

1478 E BUENA VISTA
LAKE BUENA VISTA, FL 32830 US

Current Mailing Address:

980 KELLY JOHNSON DRIVE
LAS VEGAS, NV 89119 US

New Mailing Address:

FEI Number: 86-0849733 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLAIN, ROBERT
1478 EAST BUENA VISTA DR.
LAKE BUENA VISTA
ORLANDO, FL 32830 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	DCEO	( ) Delete
Name:	LALIBERTE, GUY	
Address:	980 KELLY JOHNSON DRIVE	
City-St-Zip:	LAS VEGAS, NV 89119 US	
Title:	CFO	( ) Delete
Name:	BLAIN, ROBERT	
Address:	980 KELLY JOHNSON DRIVE	
City-St-Zip:	LAS VEGAS, NV 89119 US	
Title:	VP	(X) Delete
Name:	BOLINGBROKE, MICHAEL	
Address:	980 KELLY JOHNSON DRIVE	
City-St-Zip:	LAS VEGAS, NV 89119 US	
Title:	VP	( ) Delete
Name:	D'AMICO, MARIO	
Address:	980 KELLY JOHNSON DRIVE	
City-St-Zip:	LAS VEGAS, NV 89119 US	
Title:	VPS	( ) Delete
Name:	MACEROLA, FRANCOIS	
Address:	980 KELLY JOHNSON DRIVE	
City-St-Zip:	LAS VEGAS, NV 89119 US	

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
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: JAMES M BAXTER FIN 07/14/2007

Electronic Signature of Signing Officer or Director Date