

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90207 021 ***150.00



DOCUMENT # J33906
 1. Entity Name
BUENA VISTA HOSPITALITY GROUP, INC.

Principal Place of Business
 2910 W. BAY TO BAY BLVD
 STE 200
 TAMPA FL 33629
 US

Mailing Address
 2910 W. BAY TO BAY BLVD
 STE 200
 TAMPA FL 33629
 US



2. Principal Place of Business - No P.O. Box #
10100 International Dr.

3. Mailing Address
10100 International Dr.

Suite, Apt. #, etc.
2001

Suite, Apt. #, etc.
2001

1st MOORE CR2E034 (10/06)

City & State
Orlando, FL

City & State
Orlando, FL

Zip
32821

Country
USA

Zip
32821

Country
USA

4. FEI Number **59-2730604**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
MULLIS, HAROLD W., JR.
101 E. KENNEDY, STE 2700
TAMPA FL 33602

7. Name and Address of New Registered Agent
 Name **Frost, Michael**
 Street Address (P.O. Box Number is Not Acceptable)
10100 International Dr. # 2001
 City **Orlando** **FL** Zip Code **32821**

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]* DATE **2-9-07**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE DC	<input type="checkbox"/> Delete FROST, MICHAEL H. 2910 W, BAY TO BAY BLVD #200 TAMPA FL	TITLE DC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Frost, Michael 10100 International Dr. # 2001 Orlando, FL 32821
TITLE P	<input type="checkbox"/> Delete STOLZ, ROBERT L. 1900 LAKE BUENA VISTA LAKE BUENA VISTA FL	TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Stolz, Robert 10100 International # 2001 Orlando, FL 32821
TITLE VP	<input type="checkbox"/> Delete MOREL, FLORIAN 1900 LAKE BUENA VISTA LAKE BUENA VISTA FL	TITLE VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Morel, Florian 10100 International Dr. # 2001 Orlando, FL 32821
TITLE VP	<input type="checkbox"/> Delete HEINTZ, DONALD P 203 COVE LAKE DRIVE LONGWOOD FL 32779	TITLE VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Heintz, Donald 10100 International Dr. # 2001 Orlando, FL 32821
TITLE VP	<input type="checkbox"/> Delete WRIGHT, COLIN 115 CORAL CAY DRIVE PALM BEACH GARDENS FL 33418	TITLE VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Wright, Colin 10100 International Dr. # 2001 Orlando, FL 32821
TITLE CTRL	<input type="checkbox"/> Delete JENKINS, DONNA K 6202 ALCOT COURT TAMPA FL 33625	TITLE CTRL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Jenkins, Donna 10100 International Dr. # 2001 Orlando, FL 32821

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *[Signature]* DATE **2-9-07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR