

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L80337

FILED
Apr 27, 2009
Secretary of State

Entity Name: EMERSON FINANCIAL CORP.

Current Principal Place of Business:

6300 PARC CORNICHE DR
ORLANDO, FL 32821 US

New Principal Place of Business:

Current Mailing Address:

6300 PARC CORNICHE DR
ORLANDO, FL 32821 US

New Mailing Address:

FEI Number: 59-3024198

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLINGTON RESORT MGT INC
6300 PARC CORNICHE DR
ORLANDO, FL 32821 US

Name and Address of New Registered Agent:

BROWNSTONE, P.A
400 N. NEW YORK AVENUE
SUITE 215
WINTER PARK, FL 32789 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: ROBERT SIRIANNI

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPDS () Delete
Name: DEMKO, JOSEPH
Address: 6300 PARC CORNICHE DR
City-St-Zip: ORLANDO, FL 32821

Title: VD () Delete
Name: DEMKO JR, JOSEPH G
Address: 6300 PARC CORNICHE DR
City-St-Zip: ORLANDO, FL 32821

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: DEMKO, JOSEPH G JR
Address: 6300 PARC CORNICHE DR
City-St-Zip: ORLANDO, FL 32821

Title: P (X) Change () Addition
Name: COVIELLO, ROGER
Address: 11 NEW MEADOW RD.
City-St-Zip: LYNNFIELD, MA 01940

Title: VP () Change (X) Addition
Name: NILES, THOMAS
Address: 25 HIGHLAND AVE
City-St-Zip: LEXINGTON, MA 02421

Title: S () Change (X) Addition
Name: SIRIANNI, ROBERT JR
Address: 400 N. NEW YORK AVENUE
City-St-Zip: WINTER PARK, FL 32789

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: JOSEPH G DEMKO JR

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04/27/2009

Electronic Signature of Signing Officer or Director

Date