## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M99223

Entity Name: EVENTIDE RESORT HOTEL, INC.

FILED Jan 18, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1130 ESTERO BLVD 5662 JEREZ CT

FT. MYERS BEACH, FL 33931 US US FT MYERS, FL 33919

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

6200 GULF BLVD

ST PETE BEACH, FL 33706 US

FEI Number: 65-0023176 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOTSOPOULOS, JAMES KOTSOPOULOS, JAMES 1130 ESTERO BLVD. 5662 JEREZ CT

FT. MYERS BEACH, FL 33931 US FT MYERS, FL 33919 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: 01/18/2005

> 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

KOTSOPOULOS, JAMES KOTSOPOULOS, JAMES Name: Name:

1130 ESTERO BLVD. 5662 JEREZ CT Address: Address: City-St-Zip: FT. MYERS BEACH, FL 33931 US City-St-Zip: FT MYERS, FL 33919 US

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

Name: RADICH, DOREEN Name: 6200 GULF BLVD Address: Address: ST PETE BEACH, FL 33706 US City-St-Zip: City-St-Zip:

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

DEMENT, KAREN Name: Name: Address:

6200 GULF BLVD Address: City-St-Zip: ST PETE BEACH, FL 33706 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

VΡ SIGNATURE: KAREN DEMENT 01/18/2005