2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007
Secretary of State

DOCUMENT# N00000000722

Entity Name: OSCEOLA LEGISLATIVE EFFORT, INC.

Current Principal Place of Business:

1425 E. VINE ST.
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

1425 E. VINE ST.
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 90-0036319 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HORNER, MIKE
1425 E. VINE ST.
KISSIMMEE, FL 34744 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

OFFICERS AND DIRECTORS:

Title: CH ( ) Delete
Name: MUSE, BLAINE
Address: 817 BILL BECK BLVD.
City-St-Zip: KISSIMMEE, FL 34744

Title: D ( ) Delete
Name: KASKEY, PAUL
Address: 1300 9TH STREET
City-St-Zip: SAINT CLOUD, FL 34769

Title: D ( ) Delete
Name: DURBIN, MARK
Address: 101 N. CHURCH ST.
City-St-Zip: KISSIMMEE, FL 34741

Title: D ( ) Delete
Name: HUNZEKER, ED
Address: 1 COURTHOUSE SQUARE #4700
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: HURT, TOM
Address: 1300 9TH STREET
City-St-Zip: SAINT CLOUD, FL 34769

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: THACKER, JO
Address: 1 COURTHOUSE SQUARE #4700
City-St-Zip: KISSIMMEE, FL 34741

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK DURBIN D 02/26/2007

Electronic Signature of Signing Officer or Director — Date