## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000008391

Apr 30, 2009 Secretary of State

Entity Name: LAKE BUENA VISTA RESORT VILLAGE IV HOTEL CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 8101 RESORT VILLAGE DR. ORLANDO, FL 32821 **Current Mailing Address: New Mailing Address:** 8101 RESORT VILLAGE DR. ORLANDO, FL 32821 FEI Number: 20-0796214 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: COHEN, LARRY S. 8101 RESORT VILLAGE DR. ORLANDO, FL 32821 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition COHEN, LARRY S. COHEN, LARRY S. Name: Name: 8101 RESORT VILLAGE DR. Address: 8101 RESORT VILLAGE DR. Address: City-St-Zip: ORLANDO, FL 32821 City-St-Zip: ORLANDO, FL 32821 Title: DV () Delete Title: (X) Change ( ) Addition SUTTON, ROBERT Name: SUTTON, ROBERT Name: Address: 6462 CENTRAL AVE. Address: 6462 CENTRAL AVE. City-St-Zip: ST. PETERSBURG, FL 33707 City-St-Zip: ST. PETERSBURG, FL 33707 Title: DST () Delete Title: () Change () Addition SUTTON, SAMUEL Name: Name: 1725 UNIVERSITY DR., STE. 450 Address: Address: City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: GORDON, JOHN Name: 7011 GRAND NATIONAL DRIVE SUITE 104 Address: Address: City-St-Zip: ORLANDO, FL 32819 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN GORDON MGR 04/30/2009