

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N20166

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: CENTRAL FLORIDA HOTEL&LODGING ASSOCIATION EDUCATIONAL TRUST FUND, INC.

Current Principal Place of Business:

7380 SAND LAKE RD
STE 135
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

7380 SAND LAKE RD
STE 135
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 59-2875525 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALADECKI, RICHARD J.
7380 SAND LAKE RD
#135
ORLANDO, FL 32819 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: T () Delete
Name: SMITH, KELLY
Address: 7380 SANDLAKE RD #135
City-St-Zip: ORLANDO, FL 32819

Title: C () Delete
Name: ENGFER, PAT
Address: 7380 SANDLAKE RD #135
City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete
Name: SHERMAN, LAURA
Address: 7380 SANDLAKE RD #135
City-St-Zip: ORLANDO, FL 32819

Title: ED () Delete
Name: MALADECKI, RICHARD J.
Address: 7380 SAND LAKE RD #135
City-St-Zip: ORLANDO, FL 32819

Title: T (X) Delete
Name: ENGFER, PAT
Address: 7380 SAND LAKE RD #135
City-St-Zip: ORLANDO, FL 32819

Title: C (X) Delete
Name: BRINDA, JEFF
Address: 7380 SAND LAKE RD #135
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T/D (X) Change () Addition
Name: SARGENT, THEA
Address: 7380 SAND LAKE ROAD #135
City-St-Zip: ORLANDO, FL 32819

Title: C/D (X) Change () Addition
Name: SANSBURY, MICHAEL
Address: 7380 SAND LAKE ROAD #135
City-St-Zip: ORLANDO, FL 32819

Title: S/D (X) Change () Addition
Name: SHERMAN, LAURA
Address: 7380 SAND LAKE ROAD #135
City-St-Zip: ORLANDO, FL 32819

Title: ED (X) Change () Addition
Name: MALADECKI, RICHARD J.
Address: 7380 SAND LAKE ROAD #135
City-St-Zip: ORLANDO, FL 32819

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

Title: () Change () Addition
Name:
Address:
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD J. MALADECKI

ED

04/30/2002

Electronic Signature of Signing Officer or Director

_____ Date