

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT.

**FILED**  
**May 26, 2004 8:00 am**  
**Secretary of State**

05-26-2004 90004 020 \*\*\*\*61.25

**DOCUMENT # N97000003222**

1. Entity Name  
**HOTEL HUMAN RESOURCES ASSOCIATION OF  
CENTRAL FLORIDA, INC.**



Principal Place of Business  
**5678 W IRLO BRONSON MEM HWY  
KISSIMMEE, FL 34746**

Mailing Address  
**5678 W IRLO BRONSON MEM HWY  
KISSIMMEE, FL 34746**

**44045981**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04272004 Chg-NP CR2E037 (10/03)

4. FEI Number  
**59-3449556**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DETZEL, CHRISTOPHER A ESQ  
540 EAST HORATIO AVENUE #202  
MAITLAND, FL 32794-1030**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BARON, TOM 7769 WEST US 192 KISSIMMEE, FL 34747	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SMITHBURGER, DONNA 8101 WORLD CENTER DRIVE ORLANDO, FL 32821	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MILLER, SCHAEVON 7499 AUGUSTA NATIONAL DRIVE ORLANDO, FL 32822	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HAVARD, MARK 6375 W IRLO BRONSON HWY KISSIMMEE, FL 34747	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARKS-SECREST, MARY 5678 IRLO BRONSON HWY KISSIMMEE, FL 34746	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARTOLETTA, JIM 1751 HOTEL PLAZA BLVD LAKE BUENA VISTA, FL 32830	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JEANINE GIERKE 9000 BAY HILL BLVD. ORLANDO, FL 32819	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIZ NORFOLK 14500 CONTINENTAL GATEWAY ORLANDO, FL 32821	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JESSICA KARLSSON 1 GRAND CYPRESS BLVD. ORLANDO, FL 32836	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**MARK HAVARO**

Date

**5/12/04**

Daytime Phone #