


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 28, 2007 08:00 AM
Secretary of State

DOCUMENT # P00000084994 1. Entity Name GRANDE COURT KISSIMMEE, INC.	
---	---

Principal Place of Business 703 WATERFORD WAY STE. 800 MIAMI, FL 33126	Mailing Address 703 WATERFORD WAY STE. 800 MIAMI, FL 33126
--	--



06202007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1042496	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent STOSIK, VICTOR L 703 WATERFORD WAY STE. 800 MIAMI, FL 33126

**DO NOT WRITE
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COURTELIS, KIKI L 703 WATERFORD WAY, STE. 800 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP VASSILAROS, ELIAS 703 WATERFORD WAY, STE. 800 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOUGLAS, PITTS 703 WATERFORD WAY, STE. 800 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KURPS, JAMES 703 WATERFORD WAY, STE. 800 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PRIDGEN, DOUGLAS H 703 WATERFORD WAY, STE. 800 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000766708
06/28/07-80001-015 150.00

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/28/07

Date

305-261-9330

Daytime Phone #

DOUGLAS H. PRIDGEN, TREASURER