2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000039556

Entity Name: PARC CORNICHE CONDOMINIUM SUITE HOTEL, INC.

FILED Apr 22, 2009 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
6300 PARC CORNICHE DR. ORLANDO, FL 32821						
Current Mailing Address:				New Mailing Address:		
6300 PARC CORNICHE DR. ORLANDO, FL 32821						
FEI Number:	59-3681802	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
EMERSON FINANCIAL CORP 6300 PARC CORNICHE DR. ORLANDO, FL 32821 US				BROWNSTONE, P.A. 400 N. NEW YORK AVENUE SUITE 215 WINTER PARK, FL 32789 US		
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: ROBERT SIRIANNI JR				04/22/2009		
Electronic Signature of Registered Agent						Date
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PSD () NYKAMP, JAME 6300 PARC CO ORLANDO, FL	RNICHE DR		Title: Name: Address: City-St-Zip:		(X) Change () Addition EMKO G JR CORNICHE DR FL 32821
Title: Name: Address: City-St-Zip:	VTD () DEMKO, JOSEF 6300 PARC CO ORLANDO, FL	RNICHE DR.		Title: Name: Address: City-St-Zip:	P NYKAMP, J 6300 PARC ORLANDO,	CORNICHE DR.
Title: Name: Address: City-St-Zip:	VD () DEMKO JR, JO 6300 PARC CO ORLANDO, FL	RNCHE DR		Title: Name: Address: City-St-Zip:	VP THOMAS, N 25 HIGHLAN LEXINGTON	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:		() Change (X) Addition ROGER EADOW RD.,), MA 01940
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	400 N. NEW	() Change (X) Addition COBERT L JR / YORK AVENUE ARK, FL 32789

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

SIGNATURE: JOSEPH G DEMKO JR CEO 04/22/2009