

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000000769

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: HOSPITALITY SAFEGUARD, INC.

## Current Principal Place of Business:

1933 ISLAND WALK DR.  
ORLANDO, FL 32824

## New Principal Place of Business:

5318 TORTUGA DR  
ORLANDO, FL 32837

## Current Mailing Address:

P.O. BOX 770545  
ORLANDO, FL 328770545

## New Mailing Address:

FEI Number: 14-1789560      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLESER, DAVID M  
1933 ISLAND WALK DR.  
ORLANDO, FL 32824    US

## Name and Address of New Registered Agent:

BLESER, DAVID M  
5318 TORTUGA DR  
ORLANDO, FL 32837    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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/05/2006

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P            ( ) Delete  
Name: BLESER, EARL J  
Address: 1933 ISLAND WALK DR.  
City-St-Zip: ORLANDO, FL 32824

Title: V            ( ) Delete  
Name: BLESER, DAVID M  
Address: 1933 ISLAND WALK DR.  
City-St-Zip: ORLANDO, FL 32824

Title: ST           ( ) Delete  
Name: BLESER, NANCY B  
Address: 1933 ISLAND WALK DR.  
City-St-Zip: ORLANDO, FL 32824

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P            (X) Change ( ) Addition  
Name: BLESER, EARL J  
Address: 4010 HAMMERSMITH DR  
City-St-Zip: CLERMONT, FL 34711

Title: V            (X) Change ( ) Addition  
Name: BLESER, DAVID M  
Address: 5318 TORTUGA DR  
City-St-Zip: ORLANDO, FL 32837

Title: ST           (X) Change ( ) Addition  
Name: BLESER, NANCY B  
Address: 4010 HAMMERSMITH DR  
City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID M. BLESER

Electronic Signature of Signing Officer or Director

V

01/05/2006

Date