

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095253

FILED  
Apr 27, 2004  
Secretary of State

Entity Name: PARADISE PALMS RESORT INC.

## Current Principal Place of Business:

909 JASMINE ST.  
CELEBRATION, FL 34747

## New Principal Place of Business:

801 OAK SHADOWS ROAD  
CELEBRATION, FL 34747

## Current Mailing Address:

909 JASMINE ST.  
CELEBRATION, FL 34747

## New Mailing Address:

801 OAK SHADOWS ROAD  
CELEBRATION, FL 34747

FEI Number: 30-0167771

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LA ROSA, ANDREW  
909 JASMINE ST.  
CELEBRATION, FL 34747

## Name and Address of New Registered Agent:

LA ROSA, ANDREW  
801 OAK SHADOWS ROAD  
CELEBRATION, FL 34747

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:

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LA ROSA, ANDREW  
Address: 909 JASMINE ST.  
City-St-Zip: CELEBRATION, FL 34747

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: LA ROSA, ANDREW  
Address: 801 OAK SHADOWS ROAD  
City-St-Zip: CELEBRATION, FL 34747

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

SIGNATURE: ANDREW LA ROSA

D

04/27/2004

Electronic Signature of Signing Officer or Director

Date