

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 01, 2005 8:00 am
Secretary of State

05-03-2005 90134 005 ***150.00

DOCUMENT # P03000039505

1. Entity Name
ALAFAYA HOLDINGS, INC.



Principal Place of Business
**800 NORTH HIGHLAND AVENUE, SUITE 200
ORLANDO, FL 32803**

Mailing Address
**800 NORTH HIGHLAND AVENUE, SUITE 200
ORLANDO, FL 32803**

66020485



04222005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2341338

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**WILLIAMS, WARREN E
800 NORTH HIGHLAND AVENUE, SUITE 200
ORLANDO, FL 32803**

**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 _____ (NOTE: Registered Agent signature required when releasing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	KROPP, STEVE PRES
STREET ADDRESS	800 N. HIGHLAND AVENUE, SUITE 200
CITY- ST- ZIP	ORLANDO, FL 32803
TITLE	VP
NAME	CARLTON, CHARLES S VP-SEC
STREET ADDRESS	800 N. HIGHLAND AVENUE, SUITE 200
CITY- ST- ZIP	ORLANDO, FL 32803
TITLE	VP
NAME	PEISNER, ERIC S VP-TRES
STREET ADDRESS	800 N. HIGHLAND AVENUE, SUITE 200
CITY- ST- ZIP	ORLANDO, FL 32803
TITLE	VP
NAME	MCKINNEY, JOSEPH VP
STREET ADDRESS	800 N. HIGHLAND AVENUE, SUITE 200
CITY- ST- ZIP	ORLANDO, FL 32803
TITLE	VP
NAME	LAWLER, THOMAS VP
STREET ADDRESS	800 N. HIGHLAND AVENUE, SUITE 200
CITY- ST- ZIP	ORLANDO, FL 32803
TITLE	VP
NAME	TUTTLE, MILLS VP
STREET ADDRESS	800 N. HIGHLAND AVENUE, SUITE 200
CITY- ST- ZIP	ORLANDO, FL 32803

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IN THIS SPACE**

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 607, 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: *E. J. Keane* VP

5-26-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #