

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000078787

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: VACATIONS FLORIDA 4 LESS, INC.

## Current Principal Place of Business:

800 GOLFVIEW ST  
ORLANDO, FL 32804

## New Principal Place of Business:

## Current Mailing Address:

800 GOLFVIEW ST  
ORLANDO, FL 32804

## New Mailing Address:

FEI Number: 73-1672943

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DICERBO, ROBERT  
800 GOLFVIEW ST  
ORLANDO, FL 32804 US

## Name and Address of New Registered Agent:

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

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DICERBO, ROBERT  
Address: 4000 LAKE UNDERHILL RD V  
City-St-Zip: ORLANDO, FL 32803

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DICERBO, ROBERT  
Address: 800 GOLFVIEW STREET  
City-St-Zip: ORLANDO, FL 32804

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: ROBERT DI CERBO

PRES

04/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date