2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086037

ity Name: ELODIDA SUNIVACATION HOM

KISSIMMEE, FL 347472212

City-St-Zip:

FILED Apr 28, 2004 Secretary of State

Entity Nai	me: FLORIDA	A SUN VACATION HOMES, INC	C.		
Current Principal Place of Business:			New Principal Place of Business:		
	ATE RD. 535 D, FL 32836				
Current Mailing Address:			New Mailing Address:		
	ATE RD. 535 D, FL 32836				
FEI Number:	: 81-0627397	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address of	New Registered Agent:	
135 W. CE SUITE 110	AVID R ESQ. ENTRAL BLVD 00), FL 32801 L				
	named entity of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (ORTENZIO, JA 2901 LOTUS C KISSIMMEE, F	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VP (ORTENZIO, BR 2901 LOTUS O		Title: Name: Address:	() Change () Addition	

City-St-Zip:

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: BROCK ORTENZIO VP 04/28/2004