

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000099798

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: KISSIMMEE GUEST SERVICES, INC.

## Current Principal Place of Business:

215 CELEBRATION PL STE 500  
CELEBRATION, FL 34747

## New Principal Place of Business:

215 CELEBRATION PL STE 190  
CELEBRATION, FL 34747

## Current Mailing Address:

215 CELEBRATION PL STE 500  
CELEBRATION, FL 34747

## New Mailing Address:

215 CELEBRATION PL STE 190  
CELEBRATION, FL 34747

FEI Number: 35-2215476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRADY, KEITH A  
8209 BLUESTAR CIRCLE  
ORLANDO, FL 32819 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: BRADY, KEITH A  
Address: 8209 BLUESTAR CIRCLE  
City-St-Zip: ORLANDO, FL 32819 US

Title: D ( ) Delete  
Name: BRADY, CHRISTINE S  
Address: 8209 BLUESTAR CIRCLE  
City-St-Zip: ORLANDO, FL 32819 US

Title: D ( ) Delete  
Name: WATERHOUSE, SEAN M  
Address: 6440 EDGE O GROVE CIRCLE  
City-St-Zip: ORLANDO, FL 32819

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SEAN WATERHOUSE

D

04/21/2008

Electronic Signature of Signing Officer or Director

Date