2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000150133

City-St-Zip: SARASOTA, FL 34233 US

FILED Apr 19, 2007 Secretary of State

Entity Na	me: CRESIN	IONT HOSPITALITY, INC			
Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
	AMORADA DF D, FL 32837	RIVE	14227 ISLAMORADA [SUITE A ORLANDO, FL 32837		
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
14227 ISLAMORADA DRIVE ORLANDO, FL 32837			14227 ISLAMORADA [SUITE A ORLANDO, FL 32837		
FEI Number	: 56-2426116	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and				f New Registered Agent:	
4712 LARI SARASOT The above	EL, MAUREEN K RIDGE CIRC 「A, FL 34233 e named entity e of Florida.	CLE US	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (GORDON, JOH 14227 ISLAMO ORLANDO, FL	RADA DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (DORSCHEL, G 4712 LARK RII		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 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: GARY T. DORSCHEL D 04/19/2007