

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158929

Entity Name: SEASONS HOLDINGS, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

13506 SUMMERPORT VILLAGE PARKWAY #800
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

13506 SUMMERPORT VILLAGE PARKWAY #800
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 20-1926203

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARLOWE, ELIZABETH
11251 MARSEILLES BLVD
CLAREMONT, FL 34711 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: P () Delete
Name: BARLOWE, ELIZABETH
Address: 11251 MARSEILLES BLVD
City-St-Zip: CLAREMONT, FL 34711

Title: VP () Delete
Name: PRANIEWICZ, KIMBERLY
Address: 725 LAKE HIAWASSEE DRIVE
City-St-Zip: ORLANDO, FL 32835

Title: T () Delete
Name: RUPARELIA, KAMAL
Address: 13015 LAKESHORE GROVE DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

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: KAMAL RUPARELIA

T

04/29/2008

Electronic Signature of Signing Officer or Director

Date