

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000020021

FILED  
Feb 12, 2009  
Secretary of State

Entity Name: 1ST FOR ORLANDO VACATIONS, INC.

## Current Principal Place of Business:

9114 HIGHWAY 192  
CLERMONT, FL 34714

## New Principal Place of Business:

3201 LINDFIELDS BLVD  
KISSIMMEE, FL 34747

## Current Mailing Address:

9114 HIGHWAY 192  
CLERMONT, FL 34714

## New Mailing Address:

3201 LINDFIELDS BLVD  
KISSIMMEE, FL 34747

FEI Number: 20-2294967

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WATSON, TERENCE MR  
9114 HIGHWAY 192  
CLERMONT, FL 34714 US

## Name and Address of New Registered Agent:

WATSON, TERENCE MR  
3201 LINDFIELDS BLVD  
KISSIMMEE, FL 34747 US

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: TERRY WATSON

02/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: REYNOLDS, GINA L MRS  
Address: 17 GOLDSMID RD.  
City-St-Zip: TONBRIDGE, KENT, UK TN1 9BX

Title: PSD ( ) Delete  
Name: WATSON, TERENCE MR  
Address: 2645 STARLAKE VIEW DR  
City-St-Zip: KISSIMMEE, FL 34747

Title: VD ( ) Delete  
Name: WATSON, CAROL A MRS  
Address: 2645 STARLAKE VIEW DR  
City-St-Zip: KISSIMMEE, FL 34747

## 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: TERRY WATSON

MR

02/12/2009

Electronic Signature of Signing Officer or Director

Date