

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000044342

FILED
May 13, 2008
Secretary of State

Entity Name: FLORIDA ENCHANTED VILLAS, INC.

Current Principal Place of Business:

8751 MERCHAN TRAIL
KISSIMMEE, FL 34747 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 136874
CLERMONT, FL 34713 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALDONADO, MARY
8751 MERCHAN TRAIL
KISSIMMEE, FL 34747 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MALDONADO, MARY
Address: 8751 MERCHAN TRAIL
City-St-Zip: KISSIMMEE, FL 34747

Title: VP () Delete
Name: PEREZ, FRANCISCO R
Address: 8751 MERCHAN TRAIL
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:

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: MARY MALDONADO

PD

05/13/2008

Electronic Signature of Signing Officer or Director

_____ Date