

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000012443

Entity Name: DRAGON LEISURE, INC.

FILED  
Jul 10, 2007  
Secretary of State

## Current Principal Place of Business:

7756 INDIAN RIDGE TRAIL NORTH  
KISSIMMEE, FL 34747

## New Principal Place of Business:

## Current Mailing Address:

7756 INDIAN RIDGE TRAIL NORTH  
KISSIMMEE, FL 34747

## New Mailing Address:

FEI Number: 55-0914755

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAVIGNE, JAMES R  
LAVIGNE, COTON & ASSOCS., P.A.  
7087 GRAND NAT'L DRIVE, SUITE 100  
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

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: D ( ) Delete  
Name: ARMES, IAN RICHARD  
Address: 5 BROOK CHASE  
City-St-Zip: QUARNDON DERBY DE22 5JE,

Title: D ( ) Delete  
Name: ARMES, ELIZABETH L  
Address: 5 BROOK CHASE  
City-St-Zip: QUARNDON DERBY DE22 5JE,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ARMES, IAN RICHARD  
Address: 7756 INDIAN RIDGE NORTH  
City-St-Zip: KISSIMMEE, FL 34747

Title: D (X) Change ( ) Addition  
Name: ARMES, ELIZABETH L  
Address: 7756 INDIAN RIDGE TRAIL NORTH  
City-St-Zip: KISSIMMEE, FL 347467

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: IAN ARMES

MR

07/10/2007

Electronic Signature of Signing Officer or Director

Date