

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000022187

FILED
Mar 20, 2009
Secretary of State

Entity Name: TREASURE ISLAND RESORT RENTALS, INC.

Current Principal Place of Business:

5004 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 US

New Principal Place of Business:

Current Mailing Address:

5004 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 US

New Mailing Address:

FEI Number: 20-8671451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, JACK G
502 HARMON AVENUE
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

KASPAR, TOM
5004 THOMAS DRIVE
PANAMA CITY, FL 32408 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: TOM KASPAR

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: THOMAS, LARRY
Address: 1606 CARY CENTER
City-St-Zip: CULLMAN, AL 35055 US

Title: DVPT () Delete
Name: SUMNER, DAVID
Address: 2225 LONG COVE CIRCLE
City-St-Zip: NEWBURGH, IN 47630 US

Title: DS () Delete
Name: COOK, JACK
Address: 212 STONEHAVEN COURT
City-St-Zip: DOTHAN, AL 36305 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KITE, DOROTHY
Address: 125 VICTORIA PLACE
City-St-Zip: FAYETTEVILLE, GA 30214 US

Title: DVPT (X) Change () Addition
Name: REGISTER, MARK A
Address: PO BOX 1327
City-St-Zip: BONIFAY, FL 32425 US

Title: DS (X) Change () Addition
Name: WATSON, ROBERT S
Address: PO BOX 310574
City-St-Zip: ENTERPRISE, AL 36330 US

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: MARK A. REGISTER

DVPT

03/20/2009

Electronic Signature of Signing Officer or Director

Date