

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 29 PM 6:50

DOCUMENT # P93000028499 (0)

1. Corporation Name

ORLANDO RESORT MANAGEMENT, INC.

Principal Place of Business

**751 THIRD AVENUE
NEW SMYRNA BEACH FL 32169**

Mailing Address

**751 THIRD AVENUE
NEW SMYRNA BEACH FL 32169**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/19/1993

3a. Date of Last Report

01/25/1994

4. FEI Number

59-3181350

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**KOSMAS, JAMES M
111 LIVE OAK STREET
NEW SMYRNA BEACH FL 32168**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE DTS
NAME KOSMAS, STEVEN P
STREET ADDRESS 751 THIRD AVENUE
CITY ST ZIP NEW SMYRNA BEACH FL

TITLE DP
NAME KOSMAS, NICHOLAS G
STREET ADDRESS 751 THIRD AVENUE
CITY ST ZIP NEW SMYRNA BEACH FL

TITLE DV
NAME KOSMAS, PAUL
STREET ADDRESS 751 THIRD AVENUE
CITY ST ZIP NEW SMYRNA BEACH FL

TITLE D
NAME GORDY, HAROLD B JR
STREET ADDRESS 5200-B OCASTAL HIGHWAY
CITY ST ZIP OCEAN CITY MD 21842

TITLE D
NAME KOSMAS, JAMES M
STREET ADDRESS 111 LIVE OAK
CITY ST ZIP NEW SMYRNA BEACH FL 32168

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY ST ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY ST ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY ST ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if appointed, or on an attachment with an address.

SIGNATURE:

Nicholas G. Gordy
SIGNATURE AND TYPED OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR

3/23/95

904-428-7590