## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P94000034853

Entity Name: VENTURA HOLIDAY & VACATION CENTER, INC.

**FILED** Dec 13, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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1948 OSCEOLA PKWY 2509 PRAIRIE VIEW DRIVE KISSIMMEE, FL 34743 US WINTER GARDEN, FL 34787 LIS

**Current Mailing Address: New Mailing Address:** 

1948 OSCEOLA PKWY 2509 PRAIRIE VIEW DRIVE KISSIMMEE, FL 34743 WINTER GARDEN, FL 34787

FEI Number: 65-0505142 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOSS, LORRAINE S MOSS, LORRAINE S 1318 IVY MEADOW DRIVE 2509 PRAIRIE VIEW DRIVE ORLANDO, FL 32824 WINTER GARDEN, FL 34787 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: LORRAINE MOSS 12/13/2004

> 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition MOSS, LORRAINE S MOSS, LORRAINE S Name: Name: 3016 STILLWATER DR. 2509 PRAIRIE VIEW DRIVE Address: Address: City-St-Zip: KISSIMMEE, FL 34743 City-St-Zip: WINTER GARDEN, FL 34787

Title: VΡ ( ) Delete Title: () Change () Addition

Name: PORST. ELAINE Name: 4557 REAVES RD Address: Address: KISSIMMEE, FL 34746 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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: LORRAINE MOSS PR 12/13/2004