2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000002495

Entity Name: ALOHA KAI VACATION RENTALS, INC.

FILED Jan 19, 2012 Secretary of State

Current Princi	pal Place of Business:	New Principal Place of Business

6020 MIDNIGHT PASS ROAD 6020 MIDNIGHT PASS ROAD SARASOTA, FL 342423212 SARASOTA, FL 34242

Current Mailing Address: New Mailing Address:

6020 MIDNIGHT PASS ROAD SARASOTA, FL 342423212 6020 MIDNIGHT PASS ROAD SARASOTA, FL 34242

FEI Number: 65-0547718 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BECKER & POLIAKOFF, PA 6230 UNIVERSITY PARKWAY, SUITE 204 SARASOTA, FL 34240 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: ELKO, NEVA

Address: 2912 MCKIMM AVENUE, N.E. City-St-Zip: LOUISVILLE, OH 44641

Title:

Name: ROSE, WILLIAM

Address: 1278 ROCK VALLEY DRIVE City-St-Zip: ROCHESTER, MI 48307

Title: VP

Name: SHIPPEE, DOUGLAS
Address: SOUTH CROWN ST
City-St-Zip: ST. JOHN, NB E2L2X6, CA

Title: F

Name: MARTIN, RICHARD P Address: 3603 DARROW ROAD City-St-Zip: STOW, OH 44224

Title: VF

Name: HAEVERS, SCOTT
Address: 1112 RAVINIA DRIVE
City-St-Zip: GURNEE, IL 60031

Title: MAN

Name: SIMMONS, DELILAH

Address: 6020 MIDNIGHT PASS ROAD # 58

City-St-Zip: SARASOTA, FL 34242

I hereby 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 all other like empowered.

SIGNATURE: DELILAH SIMMONS, MANAGER MAN 01/19/2012