2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000020150

Entity Name: DNC PARKS & RESORTS AT KSC, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
40 FOUNTAIN PLAZA BUFFALO, NY 14202								
Current Mailing Address:				New Mailing Address:				
40 FOUNTAIN PLAZA BUFFALO, NY 14202			40 FOUNTAIN PLAZA LICENSING SECTION BUFFALO, NY 14202					
FEI Number:	16-1476829	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Na					Name and Address of New Registered Agent:			
C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 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.								
SIGNATUR	E:							
	Electronic	Signature of Registered Agent	t			Date	_	
Election Cam	paign Financing	Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PD () E KELLY, KEVIN T 40 FOUNTAIN PL BUFFALO, NY 14			Title: Name: Address: City-St-Zip:	PO (X) KELLY, KEVIN 40 FOUNTAIN F BUFFALO, NY	PLAZA		
Title: Name: Address: City-St-Zip:	D () E SZEFEL, DENNIS 40 FOUNTAIN PL BUFFALO, NY			Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	S () E TRYBUS, JANICE 40 FOUNTAIN PL BUFFALO, NY			Title: Name: Address: City-St-Zip:	TRYBUS, JANIO 100 LEGENDS	WAY		
Title: Name: Address: City-St-Zip:	VP () E LIVANOS, TIETS 40 FOUNTAIN PL BUFFALO, NY 14	JE AZA		Title: Name: Address: City-St-Zip:	MARCELLE, NA DNPS ADMIN B			
Title: Name: Address: City-St-Zip:	VPCO () E LEBLANC, DANIE 40 FOUNTAIN PL BUFFALO, NY			Title: Name: Address: City-St-Zip:	LEBLANC, DAN DNPS ADMIN B			
Title: Name: Address: City-St-Zip:	VP () E SOCHA, SCOTT I 40 FOUNTAIN PL BUFFALO, NY			Title: Name: Address: City-St-Zip:	()	Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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: KEVIN T. KELLY O 04/23/2007