

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000054724

FILED  
May 01, 2008  
Secretary of State

Entity Name: WRIGHT RESORT VILLAS AND HOTELS INC.

**Current Principal Place of Business:**

2460 SAND LAKE ROAD  
ORLANDO, FL 32809 US

**New Principal Place of Business:**

**Current Mailing Address:**

2460 SAND LAKE ROAD  
ORLANDO, FL 32089 US

**New Mailing Address:**

FEI Number: 59-3387249      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CROSBIE, MICHAEL D  
2460 SAND LAKE ROAD  
ORLANDO, FL 32809 US

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

CFRA, LLC  
CORP CENTER THREE AT INTERNATIONAL PLAZA  
4221 W. BOY SCOUT BLVD., 10TH FLOOR  
TAMPA, FL 336075736 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: JOYCE F. BENTUBO      05/01/2008  
\_\_\_\_\_  
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:**

Title: TSD ( ) Delete  
Name: WRIGHT, MALCOLM J ESQ  
Address: 2460 SAND LAKE ROAD  
City-St-Zip: ORLANDO, FL 32809

Title: P ( ) Delete  
Name: BALDRIDGE, JAMES MR  
Address: 2460 SAND LAKE ROAD  
City-St-Zip: ORLANDO, FL 32809

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MALCOLM J. WRIGHT      TSD      05/01/2008  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date