## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2006 08:00 AM Secretary of State

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1. Entity Nan	MENT # P9700002569	99				·	
Principal Place of Business Mailing Address  13114 SKIING PARADISE BLVD  CLERMONT, FL 34711  Principal Place of Business  13114 SKIING PARADISE BLVD  CLERMONT, FL 34711							
				1 (111)	]		
DO NOT WRITE IN THIS SPACE				04052006 No Chg-P CR2E034 (11/05)			
				4. FEI Numb		Applied For	
				59-3464484   Not Applicable  5. Certificate of Status Desired   \$8.75 Additional			
6. Name and Address of Current Registered Agent				1		Fee Required	
13114 SKIING PARADISE BLVD					NOT W		
CLERMONT, FL 34711				IN 7	THIS SP	ACE	
		:					
8. 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. I am familiar with, and accept the obligations of registered agent							
SIGNATURE							
Signature, typed or printed name of registered agent and 656 if applicable (NOTE Registered Agent signature required when renatating) 1000000000000000000000000000000000000							
FILE NOWILL FEE IS \$150.00 9. Election Campaign Financing \$5.1  After May 1, 2005 Fee will be \$550.00 Frust Fund Contribution				00 May Be ed to Fees	Ed For co	00002	
nue	OFFICERS AND DIRE	CTORS					
NAME	GRIMM, DENISE		1				
STREET ADORESS CITY-ST-ZIP	13114 SKIING PARADISE BLVD CLERMONT, FL 34711						
TITLE			ì				
name Street Modress							
CITY-ST-ZIP							
TITLE NAME							
STREET ADDRESS CITY-SI-ZIP				DO	<b>NOT W</b>	RITE	
TATLE	<u> </u>				THIS SP		
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CHY-ST-ZIP	<u></u>						
TITLE NAME						}	
STREET ADDRESS							
CITY-SI-ZIP	wells that the information and the state of	for done and average of			Maria De la la		
indicated  of the core	ertily that the information supplied with this li on this report or supplemental report is true a paration or the receiver or trustee ampowered	ing does not qualify for the exe nd accurate and that my signate to execute this report as require	mptions contained i are shall have the sa and by Chapter 607	in Unapter 119. ame legal ellect Florida Statutor	riorida Statutes, I ( as if made under or and that my came	uriner certify that the information with, that I am an officer or director appears in Block 10 or Block 11."	
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under onth, 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 10 or Block 11 if chapter 607 or an attachment with an address, with all other like empowered.							