2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000047317

1. Entity Name

DEMPSEY RESORT MANAGEMENT, INC.



FILED Apr 30, 2007 08:00 A Secretary of State

Principal Place of Business 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 33543-4499 Mailing Address

5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 33543-4499



DO NOT WRITE IN THIS SPACE

03192007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For 59-3716447 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RIEHLE, GREGORY R 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 33543

DO NOT WRITE IN THIS SPACE

4/27/07

Date

813-907-4481

Daytime Phone #

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						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS				· · · · · · · · · · · · · · · · · · ·	 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEMPSEY, THOMAS L 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 335434499				000000741435 05/15/07-80028-023 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DEMPSEY, THOMAS L 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 33543	*				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS RIEHLE, GREGORY R 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 33543		DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RIEHLE, DIANE 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 33543					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DEMPSEY, MAUREEN 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL 33543					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						

NAME OF SIGNING OFFICER OR DIRECTOR