

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 04, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P98000047317**

1. Entity Name  
**DEMPSEY RESORT MANAGEMENT, INC.**



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

Mailing Address  
**5700 SADDLEBROOK WAY  
WESLEY CHAPEL, FL 33543-4499**



02072008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3716447**

Applied For  
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**

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

000000890765  
04/15/08-00075-002 150.00  
DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE D  
NAME **DEMPSEY, THOMAS L**  
STREET ADDRESS **5700 SADDLEBROOK WAY**  
CITY-ST-ZIP **WESLEY CHAPEL, FL 335434499**

TITLE P  
NAME **DEMPSEY, THOMAS L**  
STREET ADDRESS **5700 SADDLEBROOK WAY**  
CITY-ST-ZIP **WESLEY CHAPEL, FL 33543**

TITLE VS  
NAME **RIEHLE, GREGORY R**  
STREET ADDRESS **5700 SADDLEBROOK WAY**  
CITY-ST-ZIP **WESLEY CHAPEL, FL 33543**

TITLE V  
NAME **RIEHLE, DIANE**  
STREET ADDRESS **5700 SADDLEBROOK WAY**  
CITY-ST-ZIP **WESLEY CHAPEL, FL 33543**

TITLE V  
NAME **DEMPSEY, MAUREEN**  
STREET ADDRESS **5700 SADDLEBROOK WAY**  
CITY-ST-ZIP **WESLEY CHAPEL, FL 33543**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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.

**SIGNATURE:**

*Greg Riehle*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/08 813 907 4481  
Date Daytime Phone #