

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000052101

FILED
Apr 23, 2004
Secretary of State

Entity Name: CENTRAL FLORIDA RESORT SERVICES, INC.

Current Principal Place of Business:

11860 W STATE ROAD 84
B-15
DAVIE, FL 33325

New Principal Place of Business:

Current Mailing Address:

11860 W STATE ROAD 84
B-15
DAVIE, FL 33325

New Mailing Address:

FEI Number: 65-0937725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILBERT, EDWARD H PA
5100 TOWN CENTER CIRCLE
430
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPS () Delete
Name: DAVENPORT, RICHARD
Address: 16335 MARIPOSA CIR. N.
City-St-Zip: FORT LAUDERDALE, FL 33331

Title: P () Delete
Name: GOLAN, AMNON
Address: 3620 N. 53 AVE.
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP () Delete
Name: DAVENPORT, STEVEN
Address: 18065 SW 82 AVE.
City-St-Zip: MIAMI, FL 33157

Title: VP () Delete
Name: KLEIDER, HZIK
Address: 42 ALLYAT - HANOAR ST.
City-St-Zip: HOLYROOD, KS 67450

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: RICHARD DAVENPORT

P

04/23/2004

Electronic Signature of Signing Officer or Director

Date