2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000052101

City-St-Zip:

KISSIMMEE, FL 34759

Entity Name: CENTRAL FLORIDA RESORT SERVICES, INC.

FILED Apr 13, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
11860 W S	STATE ROAD	84			
B-15					
DAVIE, FL	33325				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	STATE ROAD	34			
B-15	22225				
DAVIE, FL	_ 33320				
FEI Number	: 65-0937725	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
5100 TOV 430	EDWARD H F	IRCLE			
BOCA RA	TON, FL 3348	6 US			
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	DE:				
SIGNATU		is Ciamatura of Danistanad Am		Data	
	Electron	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	VPS ()	Delete	Title:	() Change () Addition	
Name:	DAVENPORT, F		Name:	· , · , · ,	
Address:	16335 MARIPO	SA CIR. N.	Address:		
City-St-Zip:	FORT LAUDER	DALE, FL 33331	City-St-Zip:		
Title:	Р ()	Delete	Title:	() Change () Addition	
Name:	GOLAN, AMNO	N	Name:		
Address:	19111 COLLIN	S AVENUE #801	Address:		
City-St-Zip:	SUNNY ISLES	BEACH, FL 33160	City-St-Zip:		
Title:	VP ()	Delete	Title:	() Change () Addition	
Name:	DAVENPORT, S	STEVEN	Name:		
Address:	18065 SW 82 A	NVE.	Address:		
City-St-Zip:	MIAMI, FL 331	57	City-St-Zip:		
Title:	VP ()	Delete	Title:	() Change () Addition	
Name:	KLEIDER, ITHZ		Name:		
Address:	108 OCEAN BL		Address:		

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: RICHARD DAVENPORT P 04/13/2007