2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 29, 2009
Secretary of State

DOCUMENT# S42595

Entity Name: ORLANDO RESORT DEVELOPMENT GROUP, INC.

Current Principal Place of Business:

4999 KYNGS HEATH RD
KISSIMMEE, FL 34746 US

New Principal Place of Business:

Current Mailing Address:

920 THIRD AVENUE
NEW SMYRNA BEACH, FL 32169 US

New Mailing Address:

FEI Number: 59-3062545 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOSMAS, JAMES M
111 LIVE OAK ST
NEW SMYRNA BEACH, FL 32168 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: JAMES M. KOSMAS

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: KOSMAS, STEVEN P
Address: 920 THIRD AVENUE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: DP ( ) Delete
Name: KOSMAS, NICHOLAS
Address: 920 THIRD AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: DTS ( ) Delete
Name: KOSMAS, ROBERT P
Address: 920 THIRD AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: V ( ) Delete
Name: DUFFY, TRUDY
Address: 920 THIRD AVENUE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: V ( ) Delete
Name: CROFT, J. LANCE
Address: 920 THIRD AVENUE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: V ( ) Delete
Name: PRESTON, DAN
Address: 920 THIRD AVENUE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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:

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 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.

SIGNATURE: RON STRANSKY CFO 09/29/2009

Electronic Signature of Signing Officer or Director Date