


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Mar 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # V11886 (1) 1. Corporation Name ORLANDO RESORT GROUP CORPORATION			
Principal Place of Business 2650 HOLIDAY TRAIL KISSIMMEE FL 34746 US		Mailing Address 2650 HOLIDAY TRAIL KISSIMMEE FL 34746 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
9. Name and Address of Current Registered Agent DYKXHOORN, JACOB C. 130 E. CENTRAL AVENUE LAKE WALES FL 33853		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS			
TITLE	PD	<input type="checkbox"/> DELETE	
NAME	ASHDOWN, BLAKE E.		
STREET ADDRESS	1618 STANLAKE		
CITY-ST-ZIP	EAST LANSING MI 48823		
TITLE	STD	<input type="checkbox"/> DELETE	
NAME	IMESON, DAVID S.		
STREET ADDRESS	2026 LAKE ARIANA BLVD.		
CITY-ST-ZIP	AUBURNDALE FL		
TITLE	VD	<input type="checkbox"/> DELETE	
NAME	BUCHANAN, ROGER		
STREET ADDRESS	3535 BONAIRE BLVD., #614		
CITY-ST-ZIP	KISSIMMEE FL 34741		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	P(ceo)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME			
2.3 STREET ADDRESS	6900 DELLA DR. #20		
2.4 CITY-ST-ZIP	ORLANDO, FL 32819		
3.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME			
3.3 STREET ADDRESS	802 ROSA ST		
3.4 CITY-ST-ZIP	CELEBRATION, FL 34747		
4.1 TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
4.2 NAME	ROBERT FENCE		
4.3 STREET ADDRESS	232 STRATHMORE CIRCLE		
4.4 CITY-ST-ZIP	KISSIMMEE FL 34744		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: _____ 3/10/98 (407)396 4595			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/03/1992	
4. FEI Number 59-3105480	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

CP2E034 (10/97)