

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000001808

**Entity Name:** CCCC RESORT VILLAS INC.

**Current Principal Place of Business:**

28 SANDIFORD DRIVE  
SUITE 203  
STOUFFVILLE, ON L4A 1-L8

**Current Mailing Address:**

28 SANDIFORD DRIVE  
SUITE 203  
STOUFFVILLE, ON L4A 1-L8 CA

**FEI Number:** 98-0394487

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DEROSS, JOSEPH JJR.  
C/O FEE, KOBLEGARD & DEROSS  
401 SOUTH INDIAN RIVER DRIVE  
FORT PIERCE, FL 34950 US

*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

**Officer/Director Detail :**

Title PD  
Name WALKER, WILLIAM F  
Address 28 SANDIFORD DRIVE, SUITE 201  
City-State-Zip: STOUFFVILLE ON L4A 1-L8

Title D  
Name DANIELL, WILLIAM J  
Address 28 SANDIFORD DRIVE, SUITE 201  
City-State-Zip: STOUFFVILLE ON L4A 1-L8

*I hereby 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 all other like empowered.*

**SIGNATURE:** WILLIAM F. WALKER

**PRESIDENT**

**02/08/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date