

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111566

FILED
Apr 24, 2005
Secretary of State

Entity Name: ORLANDO CLASSIC VACATIONS, INC.

Current Principal Place of Business:

693 TURTLEWOOD PL
HENDERSON, NV 89052

New Principal Place of Business:

Current Mailing Address:

1528 GRASSY RIDGE LANE
APOPKA, FL 32712

New Mailing Address:

693 TURTLEWOOD PL
HENDERSON, NV 89052

FEI Number: 16-1649493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENAO, MARIA I
1346 ROCKY RD.
213A
KISSIMMEE, FL 34744 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: PSTD () Delete
Name: POSTE, MARINA
Address: 693 TURTLEWOOD PL
City-St-Zip: HENDERSON, NV 89052

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: L. MARINA POSTE

PRES

04/24/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date