## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000062366

Entity Name: ORLANDO'S FINEST VACATION HOMES, INC.

FILED Feb 16, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

203 WEST ALTERN STREET MONROVIA, CA 91016

Current Mailing Address: New Mailing Address:

203 WEST ALTERN STREET MONROVIA, CA 91016

FEI Number: 45-0517001 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MCHENRY, SCOTT
711 MULBERRY AVENUE
CELEBRATION, FL 34747 US

MCHENRY, SCOTT
4596 EAGLET LANE
KISSIMMEE, FL 34746 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: 02/16/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVS ( ) Delete Title: SEC (X) Change ( ) Addition Name: WHICHARD, MARK Name: WHICHARD, MARK Address: 203 WEST ALTERN STREET 203 WEST ALTERN STREET

Address: 203 WEST ALTERN STREET Address: 203 WEST ALTERN STREE
City-St-Zip: MONROVIA, CA 91016 City-St-Zip: MONROVIA, CA 91016

Title: DPT ( ) Delete Title: PRES (X) Change ( ) Addition Name: WHICHARD, SUSAN Name: WHICHARD, SUSAN

Name:WHICHARD, SUSANName:WHICHARD, SUSANAddress:203 WEST ALTERN STREETAddress:203 WEST ALTERN STREETCity-St-Zip:MONROVIA, CA 91016City-St-Zip:MONROVIA, CA 91016

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: SUSAN WHICHARD PRES 02/16/2005