

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000098058

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: GTM RESORT HOMES, INC

## Current Principal Place of Business:

117 E LAKE AVENUE  
SUITE A  
AUBURNDALE, FL 33823 US

## New Principal Place of Business:

30 FOURTH STREET, SW  
WINTER HAVEN, FL 33880 US

## Current Mailing Address:

117 E LAKE AVENUE  
SUITE A  
AUBURNDALE, FL 33823 US

## New Mailing Address:

30 FOURTH STREET, SW  
WINTER HAVEN, FL 33880 US

FEI Number: 90-0070764

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOVONI MANAGEMENT SERVICES, INC.  
117 E LAKE AVENUE  
SUITE A  
AUBURNDALE, FL 33823 US

## Name and Address of New Registered Agent:

WIGGINS, TURNER A  
30 FOURTH STREET, SW  
WINTER HAVEN, FL 33880 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: TURNER A WIGGINS

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WHEATLEY, CRYSTAL  
Address: POST OFFICE BOX N1836  
City-St-Zip: NASSAU, BAHAMAS,

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: WHEATLEY, CRYSTAL  
Address: POST OFFICE BOX N1836  
City-St-Zip: NASSAU, BAHAMAS, UK

Title: D ( ) Change (X) Addition  
Name: WHEATLEY, IAN  
Address: POST OFFICE BOX N1836  
City-St-Zip: NASSAU, BAHAMAS, UK

I hereby certify that the information supplied with this filing does not qualify for the 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: IAN WHEATLEY

D

04/25/2006

Electronic Signature of Signing Officer or Director

Date