


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000098058

1. Entity Name
 GTM RESORT HOMES, INC



Principal Place of Business Mailing Address

30 FOURTH STREET, SW 30 FOURTH STREET, SW
 WINTER HAVEN, FL 33880 US WINTER HAVEN, FL 33880 US

DO NOT WRITE IN THIS SPACE



03082007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 90-0070764 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signatures, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when ratifying)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$850.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|-----------------------|
| TITLE | D |
| NAME | WHEATLEY, CRYSTAL |
| STREET ADDRESS | POST OFFICE BOX N1838 |
| CITY-ST-ZIP | NASSAU, BAHAMAS, UK |
| TITLE | D |
| NAME | WHEATLEY, IAN |
| STREET ADDRESS | POST OFFICE BOX N1838 |
| CITY-ST-ZIP | NASSAU, BAHAMAS, UK |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Crystal Wheatley FOR: GTM RESORT HOMES INC. 12-03-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #