

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J48778

FILED
Apr 26, 2006
Secretary of State

Entity Name: OCEAN STATE RESORTS, INC.

Current Principal Place of Business:

4300 GULFSHORE BLVD., NORTH
NAPLES, FL 33940

New Principal Place of Business:

4300 GULFSHORE BLVD., NORTH
NAPLES, FL 34103 US

Current Mailing Address:

4300 GULFSHORE BLVD., NORTH
NAPLES, FL 34103

New Mailing Address:

4300 GULFSHORE BLVD., NORTH
NAPLES, FL 34103 US

FEI Number: 59-2761234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SERENO, PETER R.
6810 SANDALWOOD LN
NAPLES, FL 34109 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: P () Delete
Name: PRATT, ALAN,
Address: 4740 GULFSHORE BLVD.
City-St-Zip: NAPLES, FL

Title: VP () Delete
Name: SERENO, CHRIS,
Address: 48 CARIBBEAN RD
City-St-Zip: NAPLES, FL

Title: S () Delete
Name: PRATT, SHARON,
Address: 4740 GULFSHORE BLVD.
City-St-Zip: NAPLES, FL

Title: T () Delete
Name: SERENO, PETER,
Address: 6810 SANDALWOOD LN
City-St-Zip: NAPLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: PETER R. SERENO

T

04/26/2006

Electronic Signature of Signing Officer or Director

Date