

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L44164

FILED  
Apr 24, 2006  
Secretary of State

**Entity Name:** D.T. PALM SPRINGS INTER-CONTINENTAL GOLF CENTER,INC.

**Current Principal Place of Business:**

115 SOUTH MAIN ST.  
SUITE 300  
ROYAL OAK, MI 48067

**New Principal Place of Business:**

**Current Mailing Address:**

115 SOUTH MAIN ST.  
SUITE 300  
ROYAL OAK, MI 48067

**New Mailing Address:**

**FEI Number:** 59-2988421      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAY STREET  
TALLAHASSEE, FL 32301      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: DPST ( ) Delete  
Name: GORDON, FRED  
Address: 115 SOUTH MAIN STREEET,STE 300  
City-St-Zip: ROYAL OAK, MI 48067

Title: DV ( ) Delete  
Name: CAREY, KENNETH  
Address: 990 WEST 190TH STRET,STE 100  
City-St-Zip: TORRANCE, CA 90502

Title: DV ( ) Delete  
Name: BLEW, J.PATRICK  
Address: 1526 CEDAR FARM LAND ROAD  
City-St-Zip: ANNAPOLIS, MD 21410

**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:

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: FRED GORDON

DPST

04/24/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date