2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002066

FILED Apr 19, 2005 Secretary of State

Entity Name: WYNDHAM PALMS MASTER COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 327795044

Current Mailing Address: New Mailing Address:

2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 327795044

FEI Number: 59-3663038 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:

HART, JAMES W JR SENTRY MANAGEMENT INC 2180 W SR 434 STE 5000 LONGWOOD, FL 327795044 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:

Flatoria Circular of Decides of Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 LEIFERMAN, JIM
 Name:
 BLAKEY, PETER G

 Address:
 4901 VINELAND RD STE 500
 Address:
 2306 SILVER PALM DR

 City-St-Zip:
 ORLANDO, FL 32811
 City-St-Zip:
 KISSIMMEE, FL 34747

 Name:
 DUNCAN, JUDITH
 Name:
 BRASHEARS, DONALD A

 Address:
 4901 VINELAND RD STE 500
 Address:
 293 SEABROOK DR

City-St-Zip: ORLANDO, FL 32811 City-St-Zip: HILTON HEAD ISLAND, SC 29926

Title: VPD () Delete Title: STD (X) Change () Addition

 Name:
 PUVOGEL, DOUGLAS W
 Name:
 WELLS, KELLY

 Address:
 4901 VINELAND RD STE 500
 Address:
 10933 LEDGEMONT LN

 City-St-Zip:
 ORLANDO, FL 32811
 City-St-Zip:
 WINDERMERE, FL 34780

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER G BLAKEY PD 04/19/2005