2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # N04000001621 01-13-2006 90045 046 ****61.25 THE BELLAGGIO TRAVEL CLUB INC. Principal Place of Business Mailing Address 6525 BELLAGGOLAKE BLVD 9842 DONATOWAY LAKEWORTH FL 33467 LAKEWORTH FL 33467 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01062006 Chg-NP CR2E037 (11/05) City & State City & State 4. FEI Number Applied For 73-1690830 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent METSKI, LORRAINE Street Address (P.O. Box Number is Not Acceptable) 6831 RICH 20 DV 9444 PALESTRO STREET LAKE WORTH, FL 33467 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 107 01 106 SIGNATURE red Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to П Trust Fund Contribution. Due by May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TILE ☐ Delete TITLE ☐ Change Addition NAME LEVIN, PHYLIS NAME 9842 DONATO WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL 33467 CITY-ST-ZIP VPD TITLE ☐ Delete TITLE ☐ Change ■ Addition ELGAMIL, LORNA NAME NAME 9902 MANTOVA DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL 33467 CITY-ST-71P Arnold TITLE X Detete TITLE Change Change ☐ Addition NAME METSKI, LORRAINE NAME STREET ADDRESS 9444 PALESTRO STREET STREET ADDRESS CITY-ST-70P LAKE WORTH, FL 33467 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition DINOWITZ, CINDY NAME NAME STREET ADDRESS 9568 POSITANO STREET STREET ADDRESS CITY-ST-7P LAKE WORTH, FL 33467 CITY-ST-7P TITLE ☐ Delete RDF ☐ Change ☐ Addition LEZBERG, AMY NAME NAME 6831 RIENZO DR. STREET ADORESS STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL 33467 CITY-ST-7IP NDF ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP

FILED

Jan 13, 2006 8:00 am

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 cath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CICHATURE.

Aguel & Ofly

01/07/06