2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000037478

FILED Apr 27, 2004 Secretary of State

Entity Name: WYNDHAM PALMS RESORT MANAGEMENT, INC.

Current Principal Place of Business:		New Principal Place of Business:	New Principal Place of Business:	
16554 CROSSINGS	BLVD			
SUITE 103 CLERMONT, FL 347	711 US			
Current Mailing Add	dress:	New Mailing Address:		
16554 CROSSINGS	BLVD			
SUITE 103 CLERMONT, FL 347	'11 US			
FEI Number: 74-2968503	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired	I ()	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	Name and Address of New Registered Agent:	
BOUCHARD, GUY N 16554 CROSSINGS I				
CLERMONT, FL 347 The above named en	711 US tity submits this statement for th	e purpose of changing its registered office or registered agent, o	or both,	
CLERMONT, FL 347 The above named en in the State of Florida	711 US tity submits this statement for th	e purpose of changing its registered office or registered agent, o	or both,	
CLERMONT, FL 347 The above named en in the State of Florida	711 US tity submits this statement for th		or both,	
CLERMONT, FL 347 The above named en in the State of Florida SIGNATURE: Elec	'11 US tity submits this statement for th		or both,	
in the State of Florida SIGNATURE: Elec	711 US tity submits this statement for the ctronic Signature of Registered A			
CLERMONT, FL 347 The above named en in the State of Florida SIGNATURE: Election Campaign Final OFFICERS AND DIF Title: D Name: BOUCHAR Address: 11210 CRI	tity submits this statement for the ctronic Signature of Registered Ancing Trust Fund Contribution (). RECTORS:	Agent Date		

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

SIGNATURE: GUY N. BOUCHARD DIR 04/27/2004