FILED May 09, 2005 8:00 am Secretary of State 04-13-2005 90065 044 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P0300007199 1. Entity Name WYNDHAM CONSTRUCTION SERVICES, INC.									
Principal Place			Mailing Address			66016	222		
29656 US HV CLEARWATER			29656 US HWY 19 NORTH STE 100 Clearwater, FL 33761		. 100	PPATA) L UJ		
Principal Place of Business 3. Mailing Address									
						I FERNITATII (III 20180 HERI E	A ILIAN BANKA NESII B	NIS ANIIN INDAN 19810 INIINE 19	IIT (1) I II EE
Suite, Apt. #. etc.			Suite, Apt. #, etc.			03102005 Chg)-P	CR2E034 (10/03)	
City & State			· City & State			4. FEI Number APPLIED FOR		——————————————————————————————————————	oplied For of Applicable
Zip	Zip Country		Zip Coun		ntry	5. Certificate of Status	Desired	S8.75 Add	
	6. Name	and Address of Current F	Registered Agent	·	<u> </u>	7. Name and Address	of New Reg		
GENTILE.	MICHAEL	_ L			Name				
29656 US HWY 19 NORTH STE 100 CLEARWATER, FL 33761			!		Street Address (P.O. Box Number is Not Acceptable)				
l	·				City			E	
8. The above	named entit	y submits this statement for	the purpose of changing its	*	ed agent, or both, in the S	State of Fiorio		- 1	
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.									
SIGNATURE									
FIL After Ma	E NOW!!! ay 1, 200	FEE IS \$150.00 5 Fee will be \$550.0	9. Election Campa Trust Fund Cont			00 May Be F	13	6-4519	388
10.		OFFICERS AND D	DIRECTORS	11.		ADDITIONS/CHANGE	S TO OFFICI	ERS AND DIRECTOR	S IN 11
TITLE	D Delete III							Change	Addition
name Street address	·			STRI	RET ADDRESS				1
CITY-ST-ZIP	 				'-ST-ZIP				
TITLE NAME	P Delete III							☐ Change	Addition
STREET ADORESS	1				EET ADDRESS		-		
CITY-ST-ZIP	022/11///12/11/12				-ST-7IP				
TITLE NAME			☐ Delete	PITL NAM	Ł			Change	☐ Addition
STREET ADORESS)			EET ADORESS				
CITY+\$T-ZIP			·	ÇİTY	-ST-ZIP			<u> </u>	
TITLE NAME			Delete	TITL NAM				. Change	☐ Addition
STREET ADDRESS	j	•			EET ADDRESS		•		
CFTY-ST-ZIP				CITY	-ST-ZIP				
TITLE NAME			☐ Delete	TITL NAM	E			☐ Change	☐ Addition
STREET ADDRESS					EET ADDRESS				
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NAME STREET ADDRESS				NAM STRE	E EET ADDRESS				
CITY-ST-ZIP	<u> </u>				-\$1-7IP				
indicated of the cor	on this repo poration or t	e information supplied with int or supplemental report is the receiver or trustee emporachment with an address.	true and accurate and that r wered to execute this report	ny signa as requi	mption stated in Sector shall have the sired by Chapter 607	ction 119.07(3)(i), Florida ame legal effect as if mad Florida Statutes; and tha	Statutes. I lu de under oat it my name a	rther certify that the in h; that I am an officer ppears in Block 10 or	or director Block 11 if
SIGNAT		Mahou		•	4/8/03	7.	27.28	7.3/1(