

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000019723

1. Entity Name
CENTURION RESORTS CORPORATION



FILED

06 MAY 11 PM 2:58

SECRET
TALLAHASSEE, FLORIDA

Principal Place of Business
**133 DEER RUN CT
STATELINE, NV**

Mailing Address
**3015 N. OCEAN BOULEVARD, SUITE 121
FORT LAUDERDALE, FL 33308**

[Handwritten Signature]



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

04252006 Chg-P CR2E034 (11/05)

City & State
Zip Country

4. FEI Number
20-0673135

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**FOSTER, REBECCA
3015 N. OCEAN BLVD STE 121
FORT LAUDERDALE, FL 33308**

7. Name and Address of New Registered Agent

Name
FOSTER, REBECCA A

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DPS
FOSTER, REBECCA A
3015 N. OCEAN BOULEVARD, SUITE 121
FORT LAUDERDALE, FL 33308**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DVT
LANDAU, MARC J
3015 N. OCEAN BOULEVARD, SUITE 121
FORT LAUDERDALE, FL 33308**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**V
OTTINO, SP III
3015 N OCEAN BLVD STE 121
FORT LAUDERDALE, FL 33308**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

**000076202480
06/14/06--01036--004 **5495.00**

TITLE
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☐ Change ☐ Addition

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OTTINO, SP III ☒ Change ☐ Addition

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☐ Change ☐ Addition

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rebecca A Foster 4/27/06 854/563 2444

Date

Daytime Phone #