

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051941

FILED
Jan 20, 2006
Secretary of State

Entity Name: GREAT ESCAPES TRAVEL OF WINTER PARK, INC.

Current Principal Place of Business:

1201 SOUTH ORLANDO AVE., STE. 362
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1201 SOUTH ORLANDO AVE., STE. 362
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 20-0907287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DALE, PHYLLIS
1201 SOUTH ORLANDO AVE., STE. 362
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

APPLEBEE, MARGARET A PRES
1201 SOUTH ORLANDO AVE., STE. 362
WINTER PARK, FL 32789 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: MARGARET A. APPLEBEE 01/20/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: DALE, PHYLLIS
Address: 1132 DAPPLED ELM LANE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: DALE, PHYLLIS
Address: 1132 DAPPLED ELM LANE
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: TREA () Change (X) Addition
Name: APPLEBEE, WILLIAM K SECTREA
Address: P O BOX 520359
City-St-Zip: LONGWOOD, FL 32752 US

Title: PRES () Change (X) Addition
Name: APPLEBEE, MARGARET A PRES
Address: P O BOX 520359
City-St-Zip: LONGWOOD, FL 32752 US

Title: DIR () Change (X) Addition
Name: APPLEBEE, JOHN F DIR
Address: 4963 ROCK ROSE LOOP
City-St-Zip: SANFORD, FL 32771 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MARGARET A. APPLEBEE PRES 01/20/2006
Electronic Signature of Signing Officer or Director Date