

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000093248

FILED
Apr 28, 2006
Secretary of State

Entity Name: ST. REGIS RESIDENCE CLUB, NEW YORK INC.

Current Principal Place of Business:

8801 VISTANA CENTRE DR.
ORLANDO, FL 32821

New Principal Place of Business:

Current Mailing Address:

8801 VISTANA CENTRE DR.
ORLANDO, FL 32821

New Mailing Address:

FEI Number: 20-3081304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CCEO () Delete
Name: GELLEIN, RAYMOND L JR.
Address: 8801 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 32821

Title: PD () Delete
Name: AVRIL, MATTHEW E
Address: 8801 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 32821

Title: PD () Delete
Name: RIVERA, SERGIO D
Address: 8801 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 32821

Title: VTSD () Delete
Name: CURTIN, DALE
Address: 8803 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 32821

Title: VSD () Delete
Name: WERTH, SUSAN
Address: 8803 VIRGINIA CENTRE DR.
City-St-Zip: ORLANDO, FL 32821

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change () Addition
Name: GELLEIN, RAYMOND L JR.
Address: 8801 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 32821

Title: DP (X) Change () Addition
Name: AVRIL, MATTHEW E
Address: 8801 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 32821

Title: DP (X) Change () Addition
Name: RIVERA, SERGIO D
Address: 8801 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 32821

Title: CFOT (X) Change () Addition
Name: FRYMIRE, MICHELLE SVP
Address: 8803 VISTANA CENTRE DR.
City-St-Zip: ORLANDO, FL 32821

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: VICTORIA H. CARTER

VPAS

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date