

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000097675

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: ELITE RESORTS AT CITRUS VALLEY, INC.

## Current Principal Place of Business:

14100 N HWY 19  
SALT SPRINGS, FL 32134

## New Principal Place of Business:

2500 HIGHWAY 27 SOUTH  
CLERMONT, FL 34711

## Current Mailing Address:

14100 N HWY 19  
SALT SPRINGS, FL 32134

## New Mailing Address:

P. O. BOX 4589  
SALT SPRINGS, FL 32134

FEI Number: 20-3132560

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SKATES, JEFFREY P  
1028 LAKE SUMTER LANDING  
THE VILLAGES, FL 32162 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: DP ( ) Delete  
Name: TOLAN, BRIAN  
Address: 14100 N HWY 19  
City-St-Zip: SALT SPRINGS, FL 32134

Title: DVST ( ) Delete  
Name: MAYER, EDUARD  
Address: 14100 N HWY 19  
City-St-Zip: SALT SPRINGS, FL 32134

Title: D ( ) Delete  
Name: MAYER, ROSEANNE  
Address: 14100 N HWY 19  
City-St-Zip: SALT SPRINGS, FL 32134

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: MAYER, EDUARD  
Address: 14100 N HWY 19  
City-St-Zip: SALT SPRINGS, FL 32134

Title: ST (X) Change ( ) Addition  
Name: MAYER, EDUARD  
Address: 14100 N HWY 19  
City-St-Zip: SALT SPRINGS, FL 32134

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

Title: VP ( ) Change (X) Addition  
Name: FLYNN, WILLIAM J  
Address: 14100 N HIGHWAY 19  
City-St-Zip: SALT SPRINGS, FL 32134

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: EDUARD MAYER

P

04/27/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date