

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146545

FILED
Apr 26, 2006
Secretary of State

Entity Name: RESORT STAFFING AGENCY, INC.

Current Principal Place of Business:

374 S ATLANTIC AVE
ORMOND BEACH, FL 32176

New Principal Place of Business:

140 S BEACH ST
#405
DAYTONA BEACH, FL 32114

Current Mailing Address:

374 S ATLANTIC AVE
ORMOND BEACH, FL 32176

New Mailing Address:

140 S BEACH ST
#405
DAYTONA BEACH, FL 32114

FEI Number: 20-3909825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINQUIST, GREGORY L
374 S ATLANTIC AVE
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

WINQUIST, GREGORY L
140 S BEACH ST
#405
DAYTONA BEACH, FL 32114 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: GREGORY L WINQUIST

04/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WINQUIST, GREGORY L
Address: 374 S ATLANTIC AVE
City-St-Zip: ORMOND BEACH, FL 32176

Title: D () Delete
Name: MORGAN, DIANE
Address: 374 S ATLANTIC AVE
City-St-Zip: ORMOND BEACH, FL 32176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WINQUIST, GREGORY L
Address: 140 S BEACH ST, #405
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D (X) Change () Addition
Name: MORGAN, DIANE
Address: 140 S BEACH ST, #405
City-St-Zip: DAYTONA BEACH, FL 32114

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: GREGORY L WINQUIST

D

04/26/2006

Electronic Signature of Signing Officer or Director

Date