2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000155699

FILED Sep 29, 2006 Secretary of State

Entity Name: WYNN PROPERTIES REAL ESTATE SERVICES, INC.

| Current Principal Place of Business: | | | iness: | New Principal Place of Business: | | |
|---|--|---|---|--|-----------------|--|
| 9220 BON SUITE 200 | ITA BEACH R | OAD | | | | |
| | PRINGS, FL | 34135 | US | | | |
| Current M | lailing Addre | ss: | | New Mailing Address: | | |
| | ITA BEACH R | OAD | | | | |
| SUITE 200 BONITA S |) PRINGS, FL : | 34135 | US | | | |
| FEI Number: | 20-3837232 | FEI Nu | ımber Applied For (|) FEI Number Not Applicable () Certificate of Statu | s Desired () | |
| Name and | Address of | Current | Registered Agen | t: Name and Address of New Registered A | lgent: | |
| SUITE 200 | ITA BEACH R | | JS | | | |
| | | | | | | |
| | named entity e of Florida. | submits | this statement for | the purpose of changing its registered office or registered | agent, or both, | |
| | of Florida. | submits | this statement for | the purpose of changing its registered office or registered | agent, or both, | |
| in the State | e of Florida. | | this statement for | | agent, or both, | |
| in the State | e of Florida. | | | | agent, or both, | |
| in the State | e of Florida. | nic Signa | | | | |
| in the State SIGNATUF OFFICERS Title: Name: Address: | e of Florida. RE: Electro S AND DIRECTED P (WYNN, LARRY | nic Signa CTORS:) Delete Y A BEACH RO | ature of Registered | d Agent Date | | |
| in the State | e of Florida. RE: Electro S AND DIRECT P (WYNN, LARRY 9220 BONITA BONITA SPRIN VP (CLARKE, WIL | nic Signa CTORS:) Delete Y A BEACH RO NGS, FL 3) Delete LIAM H BEACH RO | DAD, SUITE 200 DAD, SUITE 200 DAD, SUITE 200 DAD, SUITE 200 | ADDITIONS/CHANGES TO OFFICERS A Title: () Change () Addition Name: Address: | ND DIRECTOR | |

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: WILLIAM H CLARKE VP 09/29/2006