2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000167062

Entity Name: HOTEL MANAGEMENT PROFESSIONALS, INC

FILED Feb 20, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

45 PGA TOUR BLVD 830-13 A1A N

PONTE VEDRA BEACH, FL 32082 US 241

PONTE VEDRA BEACH, FL 32082 US

Current Mailing Address: New Mailing Address:

P.O. BOX 798

PONTE VEDRA BEACH, FL 32004 US

FEI Number: 26-0132200 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ZAMALLOA, DONALD

45 PGA TOUR BLVD

ZAMALLOA, DONALD

830-13 A1A N

PONTE VEDRA BEACH, FL 32082 US 241
PONTE VEDRA BEACH, FL 32082 US PONTE VEDRA BEACH, FL 32082 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: DONALD ZAMALLOA 02/20/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name:ZAMALLOA, DONALDName:ZAMALLOA, DONALDAddress:45 PGA TOUR BLVDAddress:830-13 A1A N SUITE 241

City-St-Zip: PONTE VEDRA BEACH, FL 32082 US City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 ZAMALLOA, DONALD
 Name:
 ZAMALLOA, DONALD

 Address:
 45 PGA TOUR BLVD
 Address:
 830-13 A1A N SUITE 241

City-St-Zip: PONTE VEDRA BEACH, FL 32082 US City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 ZAMALLOA, DONALD
 Name:
 ZAMALLOA, DONALD

 Address:
 45 PGA TOUR BLVD
 Address:
 830-13 A1A N SUITE 241

City-St-Zip: PONTE VEDRA BEACH, FL 32082 US City-St-Zip: PONTE VEDRA BEACH, FL 32082 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: DONALD ZAMALLOA P 02/20/2006