

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07658

FILED
Jan 05, 2007
Secretary of State

Entity Name: AMERICAN RESORT DEVELOPMENT ASSOCIATION, INC.

Current Principal Place of Business:

1201 15TH STREET, NW
SUITE 400
WASHINGTON, DC 20005 US

New Principal Place of Business:

Current Mailing Address:

1201 15TH STREET, NW
SUITE 400
WASHINGTON, DC 20005 US

New Mailing Address:

FEI Number: 52-0895129

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADSEN, STEPHANY A.
ARDA REGIONAL OFFICE
200 E. ROBINSON STREET, SUITE 1170
ORLANDO, FL 32801 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

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: GELLEIN, RAYMOND L
Address: 8801 VISTANA CENTER DR
City-St-Zip: ORLANDO, FL 32821 US

Title: SD () Delete
Name: INGERSOLL, WILLIAM B
Address: 2099 PA AVE, NW, SUITE 100
City-St-Zip: WASHINGTON, DC 200066801 US

Title: DP () Delete
Name: NUSBAUM, HOWARD C
Address: 1201 15TH ST NW, SUITE 400
City-St-Zip: WASHINGTON, DC 20005 US

Title: D () Delete
Name: BURLINGAME, JOHN M
Address: 71 S. WACKER DR 12TH FLOOR
City-St-Zip: CHICAGO, IL 60606 US

Title: DT () Delete
Name: WEBB, ROBERT
Address: 200 SOUTH ORANGE AVE STE 2300
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: DT (X) Change () Addition
Name: WEBB, ROBERT
Address: 200 SOUTH ORANGE AVE STE 1170
City-St-Zip: ORLANDO, FL 32801

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOWARD NUSBAUM

DP

01/05/2007

Electronic Signature of Signing Officer or Director

Date