

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000028703

1. Corporation Name
WYNHAM PROPERTIES, INC.

Principal Place of Business

29656 US 19 NO
STE 100
CLEARWATER FL 34621
US

Mailing Address

29656 US 19 NO
STE 100
CLEARWATER FL 34621
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

9. Name and Address of Current Registered Agent

~~MINIERI, CARL~~
~~29656 US 19 NO~~
~~STE 100~~
~~CLEARWATER FL 34621~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/20/1993

4. FEI Number

59-3182251

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

10. Name and Address of New Registered Agent

81 Name

Michael L. Gentile

82 Street Address (P.O. Box Number is Not Acceptable)

29656 US 19 NORTH, SUITE 100

83

84 City

Clearwater

FL

85 Zip Code
33761

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Michael L. Gentile, Pres.
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-13-99

12. OFFICERS AND DIRECTORS

TITLE DPST
NAME MINIERI, CARL
STREET ADDRESS 29656 US 19 NO, STE 100
CITY-ST-ZIP CLEARWATER FL 33761

TITLE President
NAME Michael L. Gentile
STREET ADDRESS 29656 US 19 NO, STE 100
CITY-ST-ZIP Clearwater, FL 33761

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE President
2.2 NAME Michael L. Gentile
2.3 STREET ADDRESS 29656 US 19 North, Suite 100
2.4 CITY-ST-ZIP Clearwater, FL 33761

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael L. Gentile
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-99

Date

727-787-3111

Daytime Phone #

0415191

CR2E034 (11/98)