2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P94000023303

LIO DEGODEO INIC

FILED May 29, 2006 Secretary of State

Entity Name: HS RESORTS, INC.	
Current Principal Place of Business:	New Principal Place of Business:
1763 SE 46TH STREET CAPE CORAL, FL 33904	3911 SW 2 AVE CAPE CORAL, FL 33914
Current Mailing Address:	New Mailing Address:
1318 LAFAYETTE ST CAPE CORAL, FL 33904	3911 SW 2 AVE CAPE CORAL, FL 33914
FEI Number: 65-0483384 FEI Number Applied	For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered	Agent: Name and Address of New Registered Agent:
HILL, THOMAS W 1318 LAFAYETTE ST CAPE CORAL, FL 33904 US	
The above named entity submits this stateme in the State of Florida.	nt for the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Regi	stered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES (X) Change () Addition Title: () Delete Title: HILL, THOMAS W SASSI, THEODORE J Name: Name: Address: 1318 LAFAYETTE STREET Address: 3911 SW 2 AVE City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33914

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

Title: SASSI, THEODORE J Name: Name: Address: Address: 3911 SW 2 AVE City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip:

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: THEODORE J SASSI **PRES** 05/29/2006