## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 18, 2007 8:00 am Secretary of State

DOCUMENT # P96000079067  1. Entity Name FEDERAL RESORT PROPERTIES, INC.					01-18-2007 90138 010 ***150.00					
Principal Place of Business Mailing Address					<b>60003001</b>					
2300 SOUTH DOCK ST. PALMETTO, FL 34221		2300 SOUTH DOCK ST. PALMETTO, FL 34221		1 (\$0)(0.0) (10				1 <b></b>	115 D) If 1884	
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address			-					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01042007	Chg-P		CR2E03	4 (12/06)		
City & State		City & State	City & State		4. FEI Numbe 65-070				·	oplied For ot Applicable
Zip	Country	Zip	Count	ry	5. Certificate				8.75 Add ee Require	
	6. Name and Address of Currer	nt Registered Agent		Name	7. Name and	Address of N	lew Regi	stered A	gent	
RIGGS, STANLEY A 1201 TALLEVAST ROAD SARASOTA, FL 34243			ļ	5 T A	NLEY	_A		5 <u>65</u>		·
				Street Address (					_	
					SOUTH	DOCK	5r.			<del></del>
				2300 :	ETTO			FL	Zip Code 34	221
<ol><li>The above the obligat</li></ol>	named entity submits this statement tions of registered agent.	for the purpose of changing its	registere	ed office or register	red agent, or bol	h, in the State	of Florida	a. Lam fa	amiliar with,	and accept
SIGNATURE.	Sadingaj,	Stanley #	.Ri	555 N	lue_		1-12	-07		
	Signature: typed or printed name free stared age	ent and title if applicable. (NOT)	E: Registered	a Agery signature requires	d when reinstating)			DATE		
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550	9. Election Campa	ign Finani	cing _ \$5	.00 May Be led to Fees			DATE		
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550 OFFICERS AN	9. Election Campa	ign Finani	cing _ \$5	.00 May Be led to Fees	CHANGES TO				3 IN 11
After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550	9. Election Campa Trust Fund Cont	ign Finandribution.  11. TITLE NAME	cing \$5	.00 May Be led to Fees			RS AND		S IN 11
10. TITLE NAME STREET ADDRESS	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550 OFFICERS AN P RIGGS, STANLEY A 2300 SOUTH DOCK ST.	9. Election Campa Trust Fund Cont D DIRECTORS	ign Finance tribution.  11. TITLE NAME STREE CHY INLE NAME STREE	Add	.00 May Be led to Fees			RS AND	DIRECTORS	
10. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550 OFFICERS AN P RIGGS, STANLEY A 2300 SOUTH DOCK ST.	9. Election Campa Trust Fund Cont D DIRECTORS	ITTLE NAME STREE CHY-	ST ADDRESS S1- ZIP	.00 May Be led to Fees			RS AND	DIRECTORS	☐ Addition
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After Management of the control of t	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550 OFFICERS AN P RIGGS, STANLEY A 2300 SOUTH DOCK ST.	9. Election Campa Trust Fund Cont D DIRECTORS  Delete  Delete	ign Financial Fi	ST-ZIP  \$5 Add  \$5 Add  \$5 Add  \$6 Add	.00 May Be led to Fees			RS AND	DIRECTORS Change Change	Addition  Addition
After M:  10.  IIILE NAME STREET ADDRESS CITY-SI-ZIP  IIILE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550 OFFICERS AN P RIGGS, STANLEY A 2300 SOUTH DOCK ST.	9. Election Campa Trust Fund Cont D DIRECTORS  Delete  Delete	IIILE NAME STREE CITY- ITILE NAME STREE CITY-	ST ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	.00 May Be led to Fees			RS AND	DIRECTORS Change Change Change	Addition  Addition  Addition

2. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Irustee empowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OF THE DISTANCE OF SIGNING OFFICER OR DIRECTOR	1-12-07	941-729-1010
SIGNATURE AND TYPED OF FRANCE OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #