

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000088346

FILED  
May 02, 2006  
Secretary of State

Entity Name: STEWART HOSPITALITY GROUP, INC.

## Current Principal Place of Business:

2401 W STATE RD 434  
117  
LONGWOOD, FL 32779 US

## Current Mailing Address:

2401 W STATE RD 434  
117  
LONGWOOD, FL 32779 US

## New Principal Place of Business:

3071 N. ORANGE BLOSSOM TRAIL  
SUITE O  
ORLANDO, FL 32804 US

## New Mailing Address:

3071 N. ORANGE BLOSSOM TRAIL  
SUITE O  
ORLANDO, FL 32804 US

FEI Number: 59-3475251

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEWART, BARRY D  
2401 WEST STATE ROAD 434  
117  
LONGWOOD, FL 32779 US

## Name and Address of New Registered Agent:

STEWART, BARRY D  
3071 N. ORANGE BLOSSOM TRAIL  
SUITE O  
ORLANDO, FL 32804 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:

05/02/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: STEWART, ROBERT E  
Address: 1005 MERIEN COURT  
City-St-Zip: OVIEDO, FL 32765

Title: PD ( ) Delete  
Name: STEWART, JEFFREY E  
Address: 504 SCHOL LAKE DR, # 206  
City-St-Zip: LONGWOOD, FL 32779

Title: VTD ( ) Delete  
Name: STEWART, BARRY D  
Address: 344 HAVERLAKE CIR  
City-St-Zip: APOPKA, FL 32712

Title: SD ( ) Delete  
Name: NAGEL, REBECCA S  
Address: 1005 MERIEN COURT  
City-St-Zip: OVIEDO, FL 32765

## 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:

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: BARRY D. STEWART

VP

05/02/2006

Electronic Signature of Signing Officer or Director

Date