

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000021835

Entity Name: WGV RESORT CATERING CO., INC.

FILED
Apr 20, 2007
Secretary of State

Current Principal Place of Business:

500 S LEGACY TRAIL
ST. AUGUSTINE, FL 32092

New Principal Place of Business:

300 JOHN Q. HAMMONS PARKWAY
SUITE 900
SPRINGFIELD, MO 65806

Current Mailing Address:

300 HAMMONS PKWY
SUITE 900
SPRINGFIELD, MO 65806

New Mailing Address:

FEI Number: 59-3499741 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: EILIAN, JONATHAN D
Address: 1114 AVENUE OF THE AMERICAS, 27TH FLOOR
City-St-Zip: NEW YORK, NY 10036

Title: CFO () Delete
Name: MUELLNER, PAUL
Address: 300 HAMMONS PARKWAY, SUITE 900
City-St-Zip: SPRINGFIELD, MO 65806

Title: SEC () Delete
Name: BROWN, RON
Address: 6900 E. CAMELBACK ROAD, SUITE 607
City-St-Zip: SCOTTSDALE, AZ 85251

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ASEC (X) Change () Addition
Name: SHANTZ, DEBRA M
Address: 300 HAMMONS PARKWAY, SUITE 900
City-St-Zip: SPRINGFIELD, MO 65806

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: JONATHAN D. EILIAN

PRES

04/20/2007

Electronic Signature of Signing Officer or Director

Date