

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000053819

Entity Name: ABEC RESORTS, INC.

FILED
Feb 28, 2007
Secretary of State

Current Principal Place of Business:

SILVER SHELLS BCH RESORT
15000 EMERALD COAST PARKWAY
DESTIN, FL 32541 US

New Principal Place of Business:

15000 EMERALD COAST PARKWAY
DESTIN, FL 32541 US

Current Mailing Address:

RESORT PROPERTY MANAGEMENT
15000 EMERALD COAST PARKWAY
DESTIN, FL 32541 US

New Mailing Address:

15000 EMERALD COAST PARKWAY
DESTIN, FL 32541 US

FEI Number: 59-3528247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVATORI & WOOD, P.L.
4001 TAMIAMI TRAIL NORTH
SUITE 330
NAPLES, FL 34103 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: PS () Delete
Name: BECNEL, DAMON
Address: 15000 EMERALD COAST PARKWAY
City-St-Zip: DESTIN, FL 32541 US

Title: T () Delete
Name: BECNEL, SARA
Address: 15000 EMERALD COAST PARKWAY
City-St-Zip: DESTIN, FL 32541 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: BECNEL, DAMON
Address: 15000 EMERALD COAST PARKWAY
City-St-Zip: DESTIN, FL 32541 US

Title: T (X) Change () Addition
Name: HILL, KELLY
Address: 15000 EMERALD COAST PARKWAY
City-St-Zip: DESTIN, FL 32541 US

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: DAMON BECNEL

DPS

02/28/2007

Electronic Signature of Signing Officer or Director

Date