

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000058348

FILED  
Aug 15, 2006  
Secretary of State

Entity Name: WHITE MOUNTAIN EXCLUSIVE RETREAT, INC.

**Current Principal Place of Business:**

1800 NE 114 STREET  
SUITE 803  
MIAMI, FL 33181

**New Principal Place of Business:**

**New Mailing Address:**

P. O. BOX 6500  
VAIL, CO 81658

**Current Mailing Address:**

1800 NE 114 STREET  
SUITE 803  
MIAMI, FL 33181

FEI Number: 84-0572036      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

KAROLYI, EUGENIA  
1800 NE 114 STREET  
SUITE 803  
MIAMI, FL 33181 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPS ( ) Delete  
Name: POPCEV, ANGEL  
Address: 105 EDWARDS VILLAGE BLVD C 210  
City-St-Zip: EDWARDS, CO 81632

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPS (X) Change ( ) Addition  
Name: POPCEV, ANGEL  
Address: C/O CHAPMAN & ISOM P.O. BOX 6500  
City-St-Zip: VAIL, CO 81658

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: ANGEL POPCEV

DPS

08/15/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date