

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 06, 2006 8:00 am**  
**Secretary of State**

04-06-2006 90011 042 \*\*\*150.00

**DOCUMENT # P98000080693**

1. Entity Name  
 THE WYNDHAM ORGANIZATION, INC.



Principal Place of Business  
 29656 U.S. HWY. 19 NORTH, STE. 100  
 CLEARWATER, FL 33761

Mailing Address  
 29656 U.S. HWY. 19 NORTH, STE. 100  
 CLEARWATER, FL 33761

40045522



**DO NOT WRITE IN THIS SPACE**

01272006 No Chg-P CR2E034 (11/05)

4. FEI Number  
 59-3533197

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

GENTILE, MICHAEL L  
 29656 U.S. HWY. 19 NORTH, STE. 100  
 CLEARWATER, FL 33761

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	MINIERI, CARL
STREET ADDRESS	29656 U.S. HWY. 19 NORTH, STE. 100
CITY-ST-ZIP	CLEARWATER, FL 33761
TITLE	P
NAME	GENTILE, MICHAEL
STREET ADDRESS	29656 US HWY 19 N. STE 100
CITY-ST-ZIP	CLEARWATER, FL 33761
TITLE	S
NAME	MINIERI, CARL N
STREET ADDRESS	29656 US HWY 19 N. STE 100
CITY-ST-ZIP	CLEARWATER, FL 33761
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. 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 trustee 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: Michael Gentile Pres.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/3/06 Daytime Phone #: 727-787-3111