

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jun 24, 2007  
Secretary of State**

DOCUMENT# S20577

Entity Name: COLONY RESORT, INC.

**Current Principal Place of Business:**

419 E GULF DR  
SANIBEL, FL 33957

**New Principal Place of Business:**

**Current Mailing Address:**

419 E GULF DR  
SANIBEL, FL 33957

**New Mailing Address:**

FEI Number: 65-0058239      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

EVANS, LARRY W  
419 E GULF DR  
SANIBEL, FL 33957      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

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: STEEVES, DAN  
Address: 635 LIDDLE LANE  
City-St-Zip: CINCINATATI, OH 45215

Title: P ( ) Delete  
Name: HARTMAN, RICHARD  
Address: 665 REHOLD WOODS COURT  
City-St-Zip: KETTERING, OH 45429

Title: T ( ) Delete  
Name: BUTLER, ZENIA  
Address: 5765 POPPY WAY  
City-St-Zip: GOLDEN, CO 80403

Title: 2VP ( ) Delete  
Name: HUNT, TERRY  
Address: 214 YOLANDE AVE, W.E.  
City-St-Zip: JAMESTOWN, NY 14701

Title: S ( ) Delete  
Name: WILSON, SHERRY  
Address: 4003 N HOLLYRIDGE CIRCLE  
City-St-Zip: PEORIA, IL 61614

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

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

Title: T (X) Change ( ) Addition  
Name: HARTMAN, RICHARD  
Address: 665 REHOLD WOODS COURT  
City-St-Zip: KETTERING, OH 45429

Title: P (X) Change ( ) Addition  
Name: JACOB, ANDREW  
Address: 750 LIDO BLVD. #56-B  
City-St-Zip: LIDO BEACH, NY 11561

Title: S (X) Change ( ) Addition  
Name: HUNT, TERRY  
Address: 214 YOLANDE AVE, W.E.  
City-St-Zip: JAMESTOWN, NY 14701

Title: BM (X) Change ( ) Addition  
Name: WILSON, SHERRY  
Address: 4003 N HOLLYRIDGE CIRCLE  
City-St-Zip: PEORIA, IL 61614

I hereby certify that the information supplied with this filing does not qualify 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: LARRY EVANS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MGR

06/24/2007

\_\_\_\_\_  
Date