

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V11820

FILED  
Apr 28, 2004  
Secretary of State

**Entity Name:** RESORT ACTIVITIES MANAGEMENT CORPORATION

**Current Principal Place of Business:**

1000 N. COLLIER BLVD  
SUITE #12  
MARCO ISLAND, FL 34145

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 1865  
MARCO ISLAND, FL 34146 US

**New Mailing Address:**

**FEI Number:** 65-0332857

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HALYE, CRAIG  
1000 N COLLIER BLVD, STE 12  
MARCO ISLAND, FL 34145 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: DPST ( ) Delete  
Name: HALYE, CRAIG  
Address: 1480 WINTERBERRY DR  
City-St-Zip: MARCO ISLAND, FL 34145

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

Title: DS ( ) Change (X) Addition  
Name: HANNA, SUSAN  
Address: 140 WINTERBERRY DR  
City-St-Zip: MARCO ISLAND, FL 34145

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:** C L HALYE

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04/28/2004

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

\_\_\_\_\_  
Date