

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2001 8:00 am
Secretary of State

03-28-2001 90184 039 ***150.00

DOCUMENT # 301484

1. Entity Name

SAN CARLOS LODGE INC

Principal Place of Business

**790 SAN CARLOS BLVD.
 FORT MYERS BEACH FL 33931**

Mailing Address

**21266 SAIL BAY DRIVE
 % JAMES D. HALL
 CASSOPOLIS MI 49031**

937412



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1160781**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**URSOLEO, JAY
 1133 ESTERO BLVD.
 UNIT 102
 FT MYERS BEACH FL 33931**

Name **Jessica L. Titus**

Street Address (P.O. Box Number is Not Acceptable)

6035 Estero Blvd.

City **Ft. Myers Beach**

FL

Zip Code **33931**

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.

SIGNATURE *Jessica L. Titus*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Jession L. Titus

3/23/01

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **SD** ☐ Delete
 NAME **HALL, JAMES D**
 STREET ADDRESS **21266 SAIL BAY DRIVE**
 CITY-ST-ZIP **CASSOPOLIS MI 49031**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VD** ☐ Delete
 NAME **HALL, JOHN R**
 STREET ADDRESS **3968 W600N**
 CITY-ST-ZIP **LEESBURG IN 46538**

TITLE **VD** ☒ Change ☐ Addition
 NAME **Hall, John R.**
 STREET ADDRESS **227 EMS C27C**
 CITY-ST-ZIP **Warsaw, IN 46582**

TITLE **PD** ☐ Delete
 NAME **HALL, JANET F**
 STREET ADDRESS **21266 SAIL BAY DRIVE**
 CITY-ST-ZIP **CASSOPOLIS MI 49031**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **TD** ☐ Delete
 NAME **HALL, MAUREEN**
 STREET ADDRESS **3968 W600N**
 CITY-ST-ZIP **LEESBURG IN**

TITLE **TD** ☒ Change ☐ Addition
 NAME **Hall, Maureen**
 STREET ADDRESS **227 EMS C27C**
 CITY-ST-ZIP **Warsaw, IN 46582**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Janet F. Hall **Janet F. Hall**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/01 (616)445-2701

Date

Daytime Phone #

CR2E034 (10/00)