2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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Aug 24, 2005 8:00 am Secretary of State DOCUMENT # N04000005742 1. Entity Name 08-09-2005 90002 010 ****61 25 LAKELAND HOTEL & MOTEL ASSOCIATION, INC. Principal Place of Business Mailing Address 35 LAKE MORTON DRIVE LAKELAND FL 33801 P.O. BOX 3607 00046433 LAKELAND FL 33802 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 20-1218376 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LOUTE, JOHN Street Address (P.O. Box Number is Not Acceptable) 35 LAKE MORTON DRIVE LAKELAND FL 33801 City Zip Code FL 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, trined of printed name of suggisted agent and take if stickgable (NOTE: Reciplered Apeni signature reduced when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Due By May 1, 2005 Trust Fund Contribution. Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. DD E Addition HILE Delete ☐ Change Director MAME HAME Debbie Godo-Turner STREET ADDRESS STREET ADDRESS 4315 Lakeland Park Drive CITY-ST-ZIP CITY-ST-ZIP Lk1d,FL33809 Director HILE ☐ Delete TATLE Carlton Hodges NAME NAME PO Box 6271 STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP Lakeland, FL 33807 Director MLS ☐ Delete TITLE ☐ Change ■ Addition NAME Bruce Dunbar PANE STREET ADDRESS STREET ADDRESS 329 E. Main Street CITY-SI-ZIP CITY-ST-ZIP Lakeland, FL 33801 Delete NTLE ☐ Change x Addition HILF Director Mike Phillips NAME NAME STREET ADDRESS STREET ADDRESS 3264 Sanoma Drive CITY-51-21P CITY-S1-21P TITLE ☐ Celute MILE Vice President ☐ Change ★ Addition John Loute NAME STREET ADDRESS STREET ADDRESS 525 West Lime Street CITY-SI-ZIP CITY-ST-ZIP Lakeland, FL 33815 Addition tuu £ Delete DIE Secretary ☐ Change NAME NAME Jacqueline Johnson STREET ADDRESS STREET ADDRESS PO Box 3607 CITY-SI-ZIP Akeland, FL 33802 12. I hereby certify that the information supplied with this fitting 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 suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all press like empowered. 7/21/2005

FILED