

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Suzanne B. McPherson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000084045 (2)**

1. Corporation Name

SPINDRIFT MOTEL, INC.



Principal Place of Business

2501 NORTH OCEAN BLVD.
FT. LAUDERDALE FL 33305

Main Address

2501 NORTH OCEAN BLVD.
FT. LAUDERDALE FL 33305

2. Principal Place of Business

2a. Mailing Address

21	State	26	State
22	City & State	27	City & State
23	Zip	28	Zip
24	County	29	County
25		30	

9. Name and Address of Current Registered Agent

**SUGAR, EDMOND L
950 SOUTH FEDERAL HWY.
HOLLYWOOD FL 33020**

3. Date Incorporated or Qualified

12/08/1993

3a. Date of Last Report

05/01/1995

4. FEIN Number

65-0459662

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This Corporation's liability for intangible tax under s. 199.032 Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. I, the undersigned, do hereby certify that I am a resident of the State of Florida, and I am qualified to act as a registered agent for the purpose of changing its registered office in the State of Florida. I am hereby applying to be registered as a registered agent for the corporation named herein. I am hereby applying for the appointment as registered agent. I am hereby applying for the appointment as registered agent.

SIGNATURE

12. OFFICERS AND DIRECTORS

NAME	D NEFF, GARY	<input type="checkbox"/> DELETED
STREET ADDRESS	% 2501 NORTH OCEAN BLVD. FORT LAUDERDALE FL 33305	
CITY & STATE	D	<input type="checkbox"/> DELETED
NAME	NEFF, MASI	
STREET ADDRESS	% 2501 NORTH OCEAN BLVD. FORT LAUDERDALE FL 33305	
CITY & STATE	D	<input type="checkbox"/> DELETED
NAME	HAUGER, MARY	
STREET ADDRESS	% 2501 NORTH OCEAN BLVD. FORT LAUDERDALE FL 33305	
CITY & STATE	D	<input type="checkbox"/> DELETED
NAME	HAUGER, PHILIP	
STREET ADDRESS	6820 N.W. 81ST PLACE TAMARAC FL 33321	
CITY & STATE	D	<input type="checkbox"/> DELETED
NAME		
STREET ADDRESS		
CITY & STATE		
NAME		
STREET ADDRESS		
CITY & STATE		

13.

13.1	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2	STREET ADDRESS	
13.3	CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.4	NAME	
13.5	STREET ADDRESS	
13.6	CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.7	NAME	
13.8	STREET ADDRESS	
13.9	CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10	NAME	
13.11	STREET ADDRESS	
13.12	CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.13	NAME	
13.14	STREET ADDRESS	
13.15	CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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SIGNATURE: *Philip D. Hauger* Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/96 954-526-8866

CR2E034 (12/95)