

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

**May 08 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # S94711 (6)

1. Corporation Name
BWVD HOTELS, INC.



Principal Place of Business P.O. BOX 160007 ALTAMONTE SPRINGS FL 32714 US	Mailing Address P.O. BOX 160007 ALTAMONTE SPRINGS FL 32716
---	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 800 TRAFALGAR CT Suite, Apt. #, etc. 22 200 City & State 23 MAITLAND FL Zip Country 24 32751 25 USA	2a. Mailing Address 26 800 TRAFALGAR CT Suite, Apt. #, etc. 27 200 City & State 28 MAITLAND FL Zip Country 29 32751 30 USA
---	--

3. Date Incorporated or Qualified 11/18/1991	
4. FEI Number 59-3097725	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**BROWN, GARY E.
1065 RAINER DRIVE
ALTAMONTE SPRINGS FL 32714**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 800 TRAFALGAR CT #200
83
84 City MAITLAND FL 85 Zip Code 32751

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* **Gary E. Brown Director/President** DATE **4/29/98**

12. OFFICERS AND DIRECTORS

TITLE	PO <input type="checkbox"/> DELETE
NAME	BROWN, GARY E.
STREET ADDRESS	1065 RAINER DRIVE
CITY-ST-ZIP	ALTAMONTE SPRINGS FL
TITLE	STD <input type="checkbox"/> DELETE
NAME	VON WELLER, HAROLD J.
STREET ADDRESS	P.O. BOX 160008
CITY-ST-ZIP	ALTAMONTE SPRINGS FL
TITLE	VD <input type="checkbox"/> DELETE
NAME	DAVIS, STEVEN S
STREET ADDRESS	1065 RAINER DRIVE
CITY-ST-ZIP	ALTAMONTE SPRINGS FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	800 TRAFALGAR CT #200
14 CITY-ST-ZIP	MAITLAND, FL 32751
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	800 TRAFALGAR CT #200
24 CITY-ST-ZIP	MAITLAND, FL 32751
31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	800 TRAFALGAR CT #200
34 CITY-ST-ZIP	MAITLAND, FL 32751
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)