

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 201206

Entity Name: GILL HOTELS COMPANY

FILED
Jun 30, 2006
Secretary of State

Current Principal Place of Business:

1140 SEABREEZE BOULEVARD
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

1500 CORDOVA ROAD
SUITE 214
FORT LAUDERDALE, FL 33316

Current Mailing Address:

P.O. BOX 21277
FORT LAUDERDALE, FL 33335

New Mailing Address:

FEI Number: 59-0799980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES-FAULI CORPORATE SERVICES, INC.
2 BISCAYNE BLVD., SUITE 3400
MIAMI, FL 33131 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCOO () Delete
Name: GILL, GEORGE W JR
Address: 1140 SEABREEZE BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DPT () Delete
Name: GILL, LINDA H
Address: 1140 SEABREEZE BLVD
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DVS () Delete
Name: GILL, MARY H
Address: 1140 SEABREEZE BLVD
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCOO (X) Change () Addition
Name: GILL, GEORGE W JR
Address: 1500 CORDOVA ROAD SUITE 214
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DPT (X) Change () Addition
Name: GILL, LINDA H
Address: 1500 CORDOVA ROAD SUITE 214
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DVS (X) Change () Addition
Name: GILL, MARY H
Address: 1500 CORDOVA ROAD SUITE 214
City-St-Zip: FORT LAUDERDALE, FL 33316

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LINDA L GILL

DPT

06/30/2006

Electronic Signature of Signing Officer or Director

Date