

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K86241

**Entity Name:** COLLEGIATE VILLAGE INN, INC.

**Current Principal Place of Business:**

11850 UNIVERSITY BLVD  
ORLANDO, FL 32817

**Current Mailing Address:**

1350 ORANGE AVE  
100  
WINTER PARK, FL 32789 US

**FEI Number:** 59-2957408

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WHWW, INC.  
390 N. ORANGE AVENUE SUITE 1500  
ORLANDO, FL 32801 US

*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

**Officer/Director Detail :**

Title PSTD  
Name DEMETREE, MARY L  
Address 941 W. MORSE BLVD  
SUITE 315  
City-State-Zip: WINTER PARK FL 32789

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARY L DEMETREE

PSTD

04/03/2019

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date