

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000027958

**Entity Name:** ZONAL HOSPITALITY SYSTEMS, INC.

**Current Principal Place of Business:**

206 W SYBELIA AVE  
MAITLAND, FL 32751

**FILED**  
**Feb 25, 2014**  
**Secretary of State**  
**CC3016374339**

**Current Mailing Address:**

20 N ORANGE AVE  
SUITE 600  
ORLANDO, FL 32801

**FEI Number: 59-3182544**

**Certificate of Status Desired: No**

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

HENDRY, STONER & BROWN, P.A.  
20 N. ORANGE AVENUE  
SUITE 600  
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	PD	Title	VPD
Name	MCLEAN, STUART	Name	HAMMOND, RICHARD
Address	206 W. SYBELIA AVE	Address	206 W. SYBELIA AVENUE
City-State-Zip:	MAITLAND FL 32751	City-State-Zip:	MAITLAND FL 32751

*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: STUART MCLEAN**

**PD**

**02/25/2014**

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

\_\_\_\_\_  
Date