2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007
Secretary of State

DOCUMENT# 248254

Entity Name: HIGH NOON APARTMENT MOTELS, INC.

Current Principal Place of Business:

4424 EL MAR DRIVE
LAUDERDALE-BY-THE-SEA
LAUDERDALE BY THE SEA, FL 33308

New Principal Place of Business:

Current Mailing Address:

4424 EL MAR DRIVE
LAUDERDALE-BY-THE-SEA
LAUDERDALE BY THE SEA, FL 33308

New Mailing Address:

FEI Number: 59-0933439 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOVAK,PAUL
4900 NORTH OCEAN BLVD. - SEA RANCH CLUB C
507
LAUDERDALE BY THE SEA, FL 33308 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	NOVAK,PAUL,	
Address:	4900 NORTH OCEAN BLVD # 507-SEA RANCH CLUB	
City-St-Zip:	LAUDERDALE BY THE SEA, FL 33308	
Title:	D	( ) Delete
Name:	NOVAK, BRUCE,	
Address:	4060 N.E. 16 TH AVE	
City-St-Zip:	OAKLAND PARK, FL 33334	
Title:	STD	( ) Delete
Name:	NOVAK,CAROL,	
Address:	4900 NORTH OCEAN BLVD#507-SEA RANCH CLUB	
City-St-Zip:	LAUDERDALE BY THE SEA, FL 33308	
Title:	D	( ) Delete
Name:	NOVAK, BRIAN,	
Address:	4321 BOUGAINVILLA DRIVE	
City-St-Zip:	LAUDERDALE BY THE SEA, FL 33308	
Title:	D	( ) Delete
Name:	NOVAK, JENNIFER,	
Address:	1 CHASE HOLLOW LANE	
City-St-Zip:	GLASTONBURY, CT 06033	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: PAUL NOVAK PD 01/08/2007

Electronic Signature of Signing Officer or Director — Date