


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

**Jan 11, 2007 08:00 AM
Secretary of State**

DOCUMENT # 301484
1. Entity Name
SAN CARLOS LODGE INC



Principal Place of Business
**790 SAN CARLOS BLVD.
FORT MYERS BEACH, FL 33931**

Mailing Address
**21266 SAIL BAY DRIVE
% JAMES D. HALL
CASSOPOLIS, MI 49031**

DO NOT WRITE IN THIS SPACE



01072007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1160781 Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

8. Name and Address of Current Registered Agent

**KIKER, PAULA
6035 ESTERO BLVD
FORT MYERS BEACH, FL 33931**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|----------------------|
| TITLE | SD |
| NAME | HALL, JAMES D |
| STREET ADDRESS | 21266 SAIL BAY DRIVE |
| CITY-ST-ZIP | CASSOPOLIS, MI 49031 |
| TITLE | VD |
| NAME | HALL, JOHN R |
| STREET ADDRESS | 227 EMS C27C |
| CITY-ST-ZIP | WARSAW, IN 46582 |
| TITLE | PD |
| NAME | HALL, JANET F |
| STREET ADDRESS | 21266 SAIL BAY DRIVE |
| CITY-ST-ZIP | CASSOPOLIS, MI 49031 |
| TITLE | TD |
| NAME | HALL, MAUREEN |
| STREET ADDRESS | 227 EMS C27C |
| CITY-ST-ZIP | WARSAW, IN 46582 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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01/11/07-80030-003 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James D. Hall 1-8-07 269-445-2701

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #