2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # 319509 Jul 18, 2000 8:00 am Secretary of State 1. Entity Name CONSOLIDATED INNS OF DAYTONA BEACH, INC. 07-18-2000 90008 049 ***158.75 Principal Place of Business Mailing Address 1798 W INT'L SPEEDWAY BLVD P O BOX 11257 DAYTONA BEACH FL 32120 P ∩ 2240 DAYTONA BEACH FL 32114 AUU0/OUA 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1174542 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FAGAN, LYNN Street Address (P.O. Box Number is Not Acceptable) 1798 W INT'L SPEEDWAY BLVD DAYTONA BEACH FL 32114 Zip Code City 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. Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible .10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. Will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11, Addition TITLE Delete TITLE FAGAN, RICHARD H NAME NAME 301 RIO PINAR TRAIL STREET ADDRESS STREET ADDRESS ORMOND BEACH FL CITY-ST-ZIP CITY-ST-ZIP VTD ☐ Addition ☐ Change Delete TITLE TITLE MILLER, JOHN J NAME NAME 435 CHIMNEY HILL PL STREET ADDRESS STREET ADDRESS ORMOND BEACH FL CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Defete TITLE TITLE FAGAN, LYNNE NAME NAME :1798 WINTIL SPEEDWAY:BLVD= STREET ADDRESS STORET ADDRESS DAYTONA BEACH FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete []] Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-7IP

TITLE

NAME STREET ADDRESS

SIGNATURE

TITLE NAME

STREET ADDRESS

CITY-ST-ZIF

LSIGNATURE REQUIRED SIGNING OFFICER OR DIRECTOR

☐ Delete

7-10-00

904-255-2501

☐ Change

☐ Addition

Daytime Phone #

10C# 319509



Consolidated Inns of Daytona Beach, Inc.

June 10, 2000

Division of Corporations
Uniform Business Report Filing
P. O. Box 1500
Tallahassee, FL 32302-1500

Re: Document #319509

Gentlemen:

I have been advised this date by Tom Gebora to write you concerning the fact that we did not receive the original notice for filing the 2000 Uniform Business Report. He advised me that we could pay the fee of \$150.00 which would have been paid with the original notice.

Enclosed is our check in the amount of \$158.75 to cover the filing fee and a certificate of status. Thank you for your consideration in this matter.

Sincerely,

Lynne L. Fagan

President_

·LEF/kc

Enclosure. 2000 Uniform Business Report and Check