

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Feb 11, 1999 8:00am  
Secretary of State

02-11-1999 90011 032 \*\*\*\*150.00



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 327901  
1. Corporation Name  
WINWOOD MOTOR LODGE INC

Principal Place of Business: 505 SOUTHEAST 18 STREET FT LAUDERDALE FL 33316  
Mailing Address: 505 SOUTHEAST 18 STREET FT LAUDERDALE FL 33316

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-headers for Suite, City & State, Zip, and Country.

3. Date Incorporated or Qualified: 03/25/1968  
4. FEI Number: 59-1233489  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing: \$5.00 May Be Added to Fees  
8. This corporation owes the current year Intangible Personal Property Tax: Yes No

9. Name and Address of Current Registered Agent  
FARRUGIA, JOSEPH  
505 SE 18TH ST  
FORT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code.

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

TITLE	PD	DELETE
NAME	FARRUGIA, JOSEPH	
STREET ADDRESS	505 SE 18TH ST	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE	VD	DELETE
NAME	FARRUGIA, WILLIAM JOSEPH	
STREET ADDRESS	505 SE 18TH ST	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE	D	DELETE
NAME	FARRUGIA, MARY E	
STREET ADDRESS	505 S.E. 18TH ST.	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE	T	DELETE
NAME	FARRUGIA, MARY E	
STREET ADDRESS	505 S.E. 18TH ST.	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William Farrugia DATE: 1/18/99 DAYTIME PHONE #: 984 5247448

CR2E034 (1/98)