## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

1. Corporation Name

STUART MOTOR LODGE, INC.

Principal Place of Business . Malling Address							s ingeign stent third tifte tente findt fifti fifti fifti fifti fifti fifti fifti fifti						
3793 NE OCEAN BLVD JENSEN BEACH FL 34957 US				3793 NE OCEAN BLVD JENSEN BEACH FL <b>349</b> 57 US									
		•				3. Date Incorporated or Qualified 05/17/1971	ed 3a. Date of Last Report 05/01/1995						
2.	Principal Place of Business			2a. Mailing Address				4. FEI Number			Applied For		
21			26	26				59-1349074		<u></u>	Not Applicable		
22	Suite, Apt. #, etc			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required				
23	City & State			City & State			Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees					
24	<i>7</i> ip	Country 25	29	Zip	30 Co	untry		8. This corporation has liability for in Florida Statutes Yes		x under s	199.032,		
	Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
1200 S. PINE ISLAND ROAD							Namo						
							82 Street Address (P.O. Box Number is Not Acceptable) 83						

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of. Section 607.0505. Florida Statutes.

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SIGNATURE	Signature, typed or princeo name of registered agent and ti	ito if a holomatike (NO)	TE: Flagistered Agent signature r	equired when reinstantial	DATE	· · · · · · · · · · · · · · · · · · ·		
12.	OFFICERS AND DI		I 13.	ADDITIONS/CHANGES TO OF				
TITLE	PD	DELETE	1. 1 7/DE		Change	Addition		
NAME	DUNCAN JR., J WALTER	_	1.2 NAME					
STRÉET ADORESS	100 PARK AVE. BLDG.		1.3 STREET ADDRESS					
CITY-ST-ZIP	OKLAHOMA CITY OK		1.4 CITY - ST - ZIF					
THILE	VP	□ DELETE	2. 1 TITLE		Change	☐ Addition		
NAME	DUNCAN, NICHOLAS V	<b>L.</b> ,	2.2 NAME			L_J //control		
STREET ADDRESS	100 PARK AVE BLDG		2 3 STREET ADDRESS					
City-St-Zip	OKLAHOMA CITY OK		2.4 CITY-ST-ZIP					
TITLE	STD	¥ ] DELETE	3. 1 TITLE	STD	☐ Change	X1 Addition		
NAME	FRY, KENNETH R		3.2 NAME	DENNIS DAN		1-1 / (do.//or/		
STREET ADDRESS	100 PARK AVE. BLDG.		3.3. STREET ADDRESS	100 PARK AVE BLDG				
C-TY - ST- ZIP	OKLAHOMA CITY OK		3.4 CHY-ST-ZIP	OKLAHOMA CITY OK				
TITLE		TT DELETE	4.1 TTLE	OKLAHOMA CITT OK	Change	Addition		
NAME		Laj retrie	4.2 NAME		Ondrigo	[ Addition		
STREET ADDRESS			4.3 STREET ADORESS					
CITY - ST - ZIF			4 4 CHY- ST-ZIP					
TITLE		[ ] DELETE	5 1 TITLE		Change	Addition		
NAME		C) Milere	5 2 NAME		[ Change	L'I MODITION		
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CITY-S1-7/P				0000018: -05/22/9601	214 12111 227 220			
TILLE		TT DECETE	5.4 CHY-ST-ZIP 6.1 TITLE	***200.00		☐ Add tion		
NAME		La prece	62 NAME	<i>ጥቶተፎ</i> ሀሀ . ሀሀ	Change			
STREET ADDRESS					( ~/~	16		
OLIV ET JUD			6.3 STREET ADDRESS		$\supset 1_{20}$	,		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further certify that the information indicated on this a certify that the information indicated on this a report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if ch / j for attachment with an address.

SIGNATURE:

THE SEASON TO SET A OR DIRECTOR

APRIL 19, 1996 405-272-1881

Zip Code

CR2E034 (12/95)

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