

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 22, 2004 8:00 am
Secretary of State

01-22-2004 90001 026 ***150.00

DOCUMENT # 382276

1. Entity Name
STUART MOTOR LODGE, INC.



Principal Place of Business
**1209 S. FEDERAL HWY
JENSEN BEACH, FL 34957 US**

Mailing Address
**3793 NE OCEAN BLVD
JENSEN BEACH, FL 34957 US**

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24003225

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01062004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1349074

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**GOOGE, JR., HOWARD E
401 EAST OSCEOLA STREET
STUART, FL 34994**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LEEDY, MARY LYNN
STREET ADDRESS	100 PARK AVE. BLDG.
CITY-ST-ZIP	OKLAHOMA CITY, OK
TITLE	VP
NAME	DUNCAN, NICHOLAS V
STREET ADDRESS	100 PARK AVE BLDG
CITY-ST-ZIP	OKLAHOMA CITY, OK
TITLE	STD
NAME	DAN, DENNIS
STREET ADDRESS	100 PARK AVE. BLDG.
CITY-ST-ZIP	OKLAHOMA CITY, OK
TITLE	AS
NAME	JONES, DEADRE
STREET ADDRESS	100 PARK AVE. BLDG.
CITY-ST-ZIP	OKLAHOMA CITY, OK
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

792-01-40