


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 22, 2004 08:00 AM
Secretary of State

DOCUMENT # 466975 1. Entity Name INGLIS INNS, INC.	
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Principal Place of Business
5346 S RIDGEWOOD AVE
PORT ORANGE, FL 32127

Mailing Address
5346 S RIDGEWOOD AVE
PORT ORANGE, FL 32127



01092004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1578379	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GARDNER, STEPHEN G.
48 TIMBER TRAIL
PORT ORANGE, FL 32127

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**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 NAME STREET ADDRESS CITY - ST - ZIP	PDT GARDNER, STEPHEN G 48 TIMBER TRAIL PORT ORANGE, FL 00000,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD GARDNER, CATHERINE R 48 TIMBER TRAIL PORT ORANGE, FL 00000,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD GARDNER, STEPHEN G JR 456 PENDREY DR. PORT ORANGE, FL 32127
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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01/22/04-80007-023 150.00

**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: Stephen G. Gardner **STEPHEN G. GARDNER** 1/20/04 386-767-1813
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #