

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 483305 (9)

1. Corporation Name

BAYMONT, INC.



Principal Place of Business

Mailing Address

14100 58TH STREET N.
RUBIN ICOT CENTER
CLEARWATER FL 34620-0796

14100 58TH STREET N.
RUBIN ICOT CENTER
CLEARWATER FL 34620-0796

3. Date Incorporated or Qualified
08/22/1975

3a. Date of Last Report
09/22/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1670918

Applied For

Not Applicable

Suite, Apt #, etc

Suite, Apt #, etc

22

27

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

QUACKENBUSH, MICHAEL P.
14100 58TH STREET N.
CLEARWATER FL 34620

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature typed or printed name of registered agent and then if applicable:

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD
NAME BIRCHENOUGH, A.J.
STREET ADDRESS 2045 STANLEY ST.
CITY - ST - ZIP MONTREAL, QUEBEC, CANADA ☐ DELETE

TITLE PD
NAME BROWN, R.W.
STREET ADDRESS 14100 58TH ST. NO.
CITY - ST - ZIP CLEARWATER FL ☐ DELETE

TITLE C
NAME DRISCOLL, K.D.
STREET ADDRESS 14100-58TH ST., N.
CITY - ST - ZIP CLEARWATER FL ☒ DELETE

TITLE V
NAME REID, W.B.
STREET ADDRESS 14100-58TH ST., N.
CITY - ST - ZIP CLEARWATER FL ☐ DELETE

TITLE V
NAME HAWKES, A.G.D.
STREET ADDRESS 14100 58TH ST. N.
CITY - ST - ZIP CLEARWATER FL ☒ DELETE

TITLE VSTD
NAME QUACKENBUSH, M.P.
STREET ADDRESS 14100-58TH ST., N.
CITY - ST - ZIP CLEARWATER FL ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE CD ☒ Change ☐ Addition
12 NAME BIRCHENOUGH, A. J.
13 STREET ADDRESS 2045 Stanley St.
14 CITY - ST - ZIP Montreal, Quebec, Canada

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE 100001871991 ☐ Change ☐ Addition
52 NAME -06/21/96--01113--028
53 STREET ADDRESS ***233.75
54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael P. Quackenbush, VP,

6/6/96

(813) 539-1661

CR2E034 (3/96)