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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 517639

1. Corporation Name

(1)

Servert Address Po Box 733	LUV-N-(CARE PET MOTEL, INC.								
September Sept	Principal Place r	of Business	Mailing Address				- I 100101 01101			J OLDIN BADIN POR
Principal Place of Europeas 2a Mailring Address 2a Mailring Address 2a Mailring Address 3a A FEI Number 59-1709680 A A A A A FEI Number 59-1709680 A A A A A A A A A	6970 SW JACK JAMES DR PO BOX 733		6970 SW JACK JAMES DR PO BOX 733			Date Incorporated or Qualified	3a. Date	of Last F	Report	
26							1			
Cry 8 State 27 Chy 8 State		ce of Business					Applied For Not Applicable			
282 Trust Fund Control Added to Fee Added t	2		27				5. Certificate of Status Desired		•	
24	·· - · · ·		<u>►</u>				, ,	□ \$5.00 May Be Added to Fees		
10, Name and Address of New Registered Agent	Zφ	F-¬ '	Zip	F	untry		8. This corporation has liability for in			
REESE, BETTY 6974 STUART FL 34997 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 against or both in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the epipoliment as registered against, and accept the obligations of, Section 607,000, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered against an accept the obligations of, Section 607,000, Florida Statutes SIGNATURE System Against part to the provisions of Sections 607,000, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered against floridation in the purpose of changing its registered against the state of florida. Such changes should floridate the state of florida Statutes SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 14. In the STATE ADDRESS STUART FL 14. In the STATE ADDRESS STUART FL 14. In the STATE ADDRESS STUART FL 25. In the STATE ADDRESS STUART FL 26. In the STATE ADDRESS STUART FL 26. In the STATE ADDRESS STUART FL 26. In the STATE ADDRESS STUART FL 27. In the STATE ADDRESS STUART FL 28. In the STATE ADDRESS STUART FL 29. In the STATE ADDRESS STUART FL 24. CITY STATE 24. CITY STATE 24. CITY STATE 24. CITY STATE 25. In the STATE ADDRESS STUART FL 26. In the STATE ADDRESS STUART FL 27. In the STATE ADDRESS STUART FL 28. In the STATE ADDRESS STUART FL 29. In the STATE ADDRESS STUART FL 24. CITY STATE 25. In the STATE ADDRESS STUART FL 26. Change Address ADDRESS STUART FL 26. Change Address ADDRESS STUART FL 27. In the STATE ADDRESS STUART FL 28. In the STATE ADDRESS STUART FL 29. In the STATE ADDRESS STUART FL 24. CITY STATE 24. CITY STATE 25. In the STATE ADDRESS STUART FL 26. Change ADDRESS STUART FL 27. In the STATE ADDRESS STUART FL 28. In the	5.5 J		k L		1				Agent	
6974 STUART FL 34997 683 644 City FL 65 Zip Code					81	Name				
STUART FL 34997 84 Oily FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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 make the flag at all the flag	•	ЗЕТТҮ			82	Street Addre	iss (P.O. Box Number is Not Acceptable	ie)		
11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above named corporation's board of directors. I hereby accept the purpose of changing its 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. If shall not be displanted of Section 607,0505, Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent. If shall not be displanted of Section 607,0505, Florida Statutes, the above named of directors. I hereby accept the appointment as registered agent. If shall not be displanted to Section 607,0505, Florida Statutes, the above named of directors. I hereby accept the appointment as registered agent. If shall not be displanted to the state of florida Statutes and the state of florida Statutes. SIGNATURE 12.		FL 34997			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 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 stand a vivil, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE SIGNATURE SUBSTANCE OF FIRST AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 10. P RESE, STEVEN 0974 SW JACK JAMES ST STUART FL 14 CDT-S1-2P 10.1 P OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 12 WAVE 6974 SW JACK JAMES ST STUART FL 14 CDT-S1-2P 10.1 P OFFICERS AND DIRECTORS IN 1 14 CDT-S1-2P 10.1 P OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 STUART FL 24 CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 ACCOUNTY S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OFFICERS AND DIRECTORS IN 1 15 STREET ADDRESS CDT-S1-2P 10.1 OF					84	City			85 Z	io Code
SIGNATURE Symbol type of 0 profection in 20 implanted agent and title if injust > all PRO Projected Agent big and are recorded by a content agent and title if injust > all PRO PROJECT PROJEC		<u></u>			Ш.	•		<u> </u>		•
NAME REESE, STEVEN 12 NAME 12 NAME 13 STREET ADDRESS 13 STREET ADDRESS 13 STREET ADDRESS 14 CHY-ST-ZIP 14 CHY-ST-ZIP 14 CHY-ST-ZIP 14 CHY-ST-ZIP 14 CHY-ST-ZIP 14 CHY-ST-ZIP 15 CHANGE ADDRESS 15 CHY-ST-ZIP 15 CHANGE ADDRESS 15 CHY-ST-ZIP 15 CHANGE ADDRESS 15 CHY-ST-ZIP 15	12.		DIRECTORS	13.		signature required s		ICERS AND		ORS IN 12
STREET ADDRESS STUART FL	1	REESE. STEVEN				ĺ		L	_ Unange	Aboilion
THE	ł.					ADDRESS				
NAME	City-St ZiP			1.4 C	HTY-ST	- ZIP				
STREET ADDRESS G974 SW JACK JAMES ST 23 STREET ADDRESS 24 CITY-ST-ZIP	TILLE	•	. DELETE	2 1 T	TITLE				Change	☐ Addition
STUART FL				2 2 N	AME					
DELETE S DELETE S TITLE Change Ad				2 3 S	TREET A	ADDRESS				
REESE, BETTY			C DELETE		• -	- ZIP			7 Change	- Addition
STREET LADDRESS 6974 SW JACK JAMES ST 33 STREET ADDRESS STUART FL 34 CITY - ST - ZIP III.		▼	בַן טנננונ					L	_ change	L Addition
STUART FL 34 CITY - ST - ZIP						ADDRESS				
NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP TOTE DELETE 5.1 TITLE	CHTY ST ZW	STUART FL				1				
STREET ADDRESS 43 STREET ADDRESS	1II. f		☐ DELETE	4.11	TITLE				Change	Addition
CITY-ST-ZIP 44.CITY-ST-ZIP INTE DELETE 5.1TITLE	NAMC			4.2 N	IAME					
DELETE	STREET ADORESS			43S	TREELA	address				
NAME 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY - ST - ZIP 54 CITY - ST - ZIP TITLE DELETE 6 1 TITLE Change Ad			FIREIEN			- ZIP				<u></u>
STREET ADDRESS			☐ DELETE					L	_ Change	Addition
CITY+ST-7IF						1DDDCCC				
TITLE Change Ad						i				
	1		DELETE			- 211		г	7 Chance	Addition
NAME 62 NAME	NAME							_		
STREET ADDRESS 63 STREET ADDRESS	ř.					ADDRESS				
CITY ST-ZIP 64 CITY-ST-ZIP				64C	IZ-YTK	- <i>I</i> IP				
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), Fiorida Statutes. I furt 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 u 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 na	certify that t	the information indicated on this annu	al report or suriolemental an	nual report	is true	e and accurate	e and that my cionature chall have the	eamo logal i	affact ac i	if made under

Suly-treas. 1/18/96

(407)2876345