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

SIGNATURE:

FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS 686530 DOCUMENT # 1. Corporation Name SILVER SANDS MOTEL, INC. Principal Place of Business Mailing Address 1301 GULF DRIVE N C/O SILVER SURF MOTEL INC **BRADENTON BEACH FL 34217** 1301 GULF DRIVE N **BRADENTON BEACH FL 34217** 3. Date Incorporated or Qualified 09/04/1980 04/11/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2019426 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes X Yes No Country 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RODOCKER, BARBARA A. Street Address (P.O. Box Number is Not Acceptable) 82 5841 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228 83 City 84 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 accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 **PST** THLE DELETE 1.1 TITLE ☐ Change Addition RODOCKER, BARBARA A. NAME 12 NAME 5841 GULF OF MEXICO DR. STREET ADDRESS 1.3 STREET ADDRESS LONGBOAT KEY FL CITY-ST-ZIP 1.4 CHTY - ST - ZIP TITLE □ DELETE 2.1 TITLE ☐ Change Addition RODOCKER, BARBARA A. NAME 22 NAME 5841 GULF OF MEXICO DR. STREET ADDRESS 2.3 STREET ADDRESS LONGBOAT KEY FL CHTY - ST - ZIP 24 CITY-ST-ZIP THILE DELETE 3 1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4 1 TITLE ☐ Change ☐ Addition NAME 42 NAME STHEET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP THILE DELETE 5. 1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHTY-ST-ZIP 54 CITY-ST-ZIP THILE DELETE 6 1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST-7IP 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

X1/24/96

(12/95)

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