## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

SIGNATURE:

## Secretary of State DOCUMENT # F04000000376 02-17-2006 90073 046 \*\*\*150.00 FT. MYERS INNKEEPERS, INC. UUULIJAJ Principal Place of Business Mailing Address 1400 ESTEROW BLVD. 1000 MARKET STREET, BLDG. 1, SUITE 300 FT. MYERS BEACH, FL 33931 PORTSMOUTH, NH 03801 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01232006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For 20-0579113 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 Zip Code 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Defete TITLE GREENE, DOUGLAS NAME 100 MARKET STREET, BLDG. 1, SUITE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PORTSMOUTH, NH 03801 CITY-ST-ZIP ☐ Delete TITLE TITLE AKRIDGE, DAVID NAME NAME 1000 Horket St. Bldg. One Juite 300 100 MARKET STREET, BLDG. 1, SUITE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PORTSMOUTH, NH 03801 CITY-ST-718 ☐ Delete □/Change TITLE TITLE ☐ Addition KEANE, THOMAS M NAME NAME ect St. Blog. One Suite 300 100 MARKET STREET, BLDG. 1, SUITE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PORTSMOUTH, NH 03801 CITY-ST-ZIP TITLE TD ☐ Delete ☐ Addition GREENE, R J NAME NAME 1000 Market St. Bldg. One Soite 300 100 MARKET STREET, BLDG, 1, SUITE 300 STREET ADDRESS STREET ADDRESS PORTSMOUTH, NH 03801 CITY-ST-70 CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 true ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

Feb 17, 2006 8:00 am