

1-29-97 0-0941-C

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSFILED
Jan 29 1997 8:00am
Secretary of State

DOCUMENT # F94000001267 (3)

1. Corporation Name
SHO LODGE, INC.

Principal Place of Business

217 WEST MAIN ST.
GALLATIN TN 37066

Mailing Address

217 WEST MAIN ST.
GALLATIN TN 37066-3243

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

03/14/1994

3a. Date of Last Report

01/23/1996

4. FEI Number

62-1015641

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PCEO ☐ DELETENAME MOORE, LEON
STREET ADDRESS 217 WEST MAIN ST.
CITY- ST- ZIP GALLATIN TN 37066TITLE VD ☐ DELETENAME JOHNSON, RICHARD L
STREET ADDRESS 217 WEST MAIN ST.
CITY- ST- ZIP GALLATIN TN 37066TITLE STD ☐ DELETENAME MARLOWE, BOB
STREET ADDRESS 217 WEST MAIN ST.
CITY- ST- ZIP GALLATIN TN 37066TITLE V ☐ DELETENAME MARCOU, RONALD L
STREET ADDRESS 217 WEST MAIN ST.
CITY- ST- ZIP GALLATIN TN 37066TITLE V ☐ DELETENAME BUTTOLPH, JOHN C
STREET ADDRESS 217 WEST MAIN ST.
CITY- ST- ZIP GALLATIN TN 37066TITLE ☐ DELETENAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PCEOD ☒ Change ☐ Addition1.2 NAME MOORE, LEON
1.3 STREET ADDRESS 217 WEST MAIN ST.
1.4 CITY- ST- ZIP GALLATIN TN 370662.1 TITLE V ☐ Change ☒ Addition2.2 NAME PEYTON, TINA
2.3 STREET ADDRESS 217 WEST MAIN ST.
2.4 CITY- ST- ZIP GALLATIN TN 370663.1 TITLE CFO ☐ Change ☒ Addition3.2 NAME CORBETT, MICHAEL
3.3 STREET ADDRESS 217 WEST MAIN ST.
3.4 CITY- ST- ZIP GALLATIN TN 370664.1 TITLE D ☐ Change ☒ Addition4.2 NAME SADLER, EARL
4.3 STREET ADDRESS 436 ENOS REED DR
4.4 CITY- ST- ZIP NASHVILLE TN 37210-43025.1 TITLE D ☐ Change ☒ Addition5.2 NAME MOSKOVITZ, HELEN
5.3 STREET ADDRESS 95 WHITE BRIDGE RD
5.4 CITY- ST- ZIP NASHVILLE TN 372056.1 TITLE V ☐ Change ☒ Addition6.2 NAME GROUT, JAMES
6.3 STREET ADDRESS 217 WEST MAIN ST.
6.4 CITY- ST- ZIP GALLATIN TN 37066

14. I do 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 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.

SIGNATURE:

Bob Marlowe, Bob Marlowe, Secary / Treas.

1-22-97

(615) 452-7200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)