## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000001622

City-St-Zip:

FAIRVIEW, NC 28730

Entity Name: CARRIAGE INN OF CHARLOTTE, INC.

FILED Apr 02, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1789 BILL FRANCE BLVD DAYTONA BEACH, FL 32119 **Current Mailing Address: New Mailing Address:** P.O. BOX 575 145 WINDING RIDGE RD FAIRVIEW, NC 28730 FAIRVIEW, NC 28730 FEI Number: 56-0940156 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HENSON, E.A. 8713 BRITTANIA DRIVE FORT MYERS, FL 33912 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DST ( ) Delete Title: () Change () Addition WHITE, THOMAS L Name: Name: P.O. BOX 757 Address: Address: City-St-Zip: FAIRVIEW, NC 28730 City-St-Zip: Title: DV Title: () Delete (X) Change ( ) Addition Name: WHITE, JOHN S Name: WHITE, JOHN S RT. 2, BOX 3 7471 HWY 63 Address: Address: LEICESTER, NC 28748 LEICESTER, NC 28748 City-St-Zip: City-St-Zip: Title: Title: CP ( ) Delete () Change () Addition LEE, WHITE Name: Name: 145 WINDING RIDGE RD Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JOHN SPENCER WHITE DV 04/02/2007