

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

0224565

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000003661

1. Corporation Name
SERVICO PENSACOLA 7330, INC.

Principal Place of Business
1601 BELVEDERE RD STE 501 SOUTH
WEST PALM BEACH FL 33406

Mailing Address
1601 BELVEDERE RD STE 501 SOUTH
WEST PALM BEACH FL 33406

2. Principal Place of Business

21 Suite 3445 Peachtree Rd. NE
22 Suite 700
23 City, Atlanta, GA 30326

2a. Mailing Address

26 3445 Peachtree Rd. NE
27 Suite 700
28 Atlanta, GA 30326

Zip 29 Country 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 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 title if applicable

IN 12. Registered Agent signature required when resubmitting

DATE

12. OFFICERS AND DIRECTORS

TITLE PCEO
NAME BUDDEMEYER, DAVID
STREET ADDRESS 1601 BELVEDERE ROAD, STE 501 SOUTH
CITY-ST-ZIP WEST PALM BEACH FL

DELETE

TITLE VS
NAME DIAZ, CHARLES M
STREET ADDRESS 1601 BELVEDERE ROAD, SUITE 5401 S
CITY-ST-ZIP WEST PALM BEACH FL 33406

DELETE

TITLE VAS
NAME HALE, PHILLIP
STREET ADDRESS 1601 BELVEDERE ROAD, STE 501 SOUTH
CITY-ST-ZIP WEST PALM BEACH FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

14. I 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, with all other like empower

SIGNATURE: *Robert Flanders*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

04/28/99 AM 9:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/28/1995

4. FEI Number

65-0592815

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax Yes No

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 City
84 Zip Code

IN 13. Registered Agent signature required when resubmitting

DATE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

13. PRES
Robert Flanders
3445 Peachtree Rd. NE Suite 700
Atlanta, GA 30326

Change Addition

VST
Mark Rafuse
3445 Peachtree Rd. NE Suite 700
Atlanta, GA 30326

Change Addition

800002857828
-04/30/99--01034--001
***6150.00 ***150.00

Change Addition

51 STREET ADDRESS
52 CITY-ST-ZIP
53 TITLE
54 NAME
55 STREET ADDRESS
56 CITY-ST-ZIP
57 TITLE
58 NAME
59 STREET ADDRESS
60 CITY-ST-ZIP

Change Addition

CR2E034 (11/98)

Robert Flanders 4/28/99 (404) 364-9400