

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 25 1996 8:00 am
Secretary of State

DOCUMENT # F95000004894 (0)

1. Corporation Name

BINAS GUEST HOUSE, INC.

Principal Place of Business

1612 ASHLEY MILL DRIVE
CHATTANOOGA TN 37421

Mailing Address

1612 ASHLEY MILL DRIVE
CHATTANOOGA TN 37421

2. Principal Place of Business

21 818 FLEMING STREET

Suite, Apt. #, etc.

22 City & State

23 KEY WEST, FL

Zip

24 33040

Country

25 MONROE

2a. Mailing Address

26 816 FLEMING STREET

Suite, Apt. #, etc.

27 # 2

City & State

28 KEY WEST, FL

Zip

29 33040

Country

30 MONROE

3. Date Incorporated or Qualified

10/09/1995

3a. Date of Last Report

1/1

4. FEI Number

62-1613017

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GALCHUTT, WILLIAM
816 FLEMING ST., APT. 3
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name

SAME

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

816 FLEMING STREET # 2

83

SAME

84 City

SAME

FL

85 Zip Code

SAME

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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: *William H. Galchutt* BY WILLIAM H. GALCHUTT, PRESIDENT
Date: 1/19/96

12. OFFICERS AND DIRECTORS

1. TITLE

NAME: PD
GALCHUTT, WILLIAM H
STREET ADDRESS: 816 FLEMING ST APT. 3
CITY, ST, ZIP: KEY WEST FL 33040

2. TITLE

NAME: DV
BASS, STEPHEN G
STREET ADDRESS: 1612 ASHLEY MILL DRIVE
CITY, ST, ZIP: CHATTANOOGA TN 37421

3. TITLE

NAME: SD
LANGSTON, JOSEPH C JR
STREET ADDRESS: 816 FLEMING ST APT. 3
CITY, ST, ZIP: KEY WEST FL 33040

4. TITLE

NAME: TD
KOSIK, JOHN A JR
STREET ADDRESS: 1612 ASHLEY MILL DRIVE
CITY, ST, ZIP: CHATTANOOGA TN 37421

5. TITLE

NAME: ☐ DELETE

STREET ADDRESS:

CITY, ST, ZIP:

6. TITLE

NAME: ☐ DELETE

STREET ADDRESS:

CITY, ST, ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☒ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

816 FLEMING ST #2
KEY WEST, FL 33040

LANGSTON, JOSEPH C. JR
816 FLEMING ST #2
KEY WEST, FL 33040

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.

SIGNATURE:

Joseph C. Langston Jr
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

1/19/96

305 294-7775
Daytime Phone #

CR2E034 (12/95)