

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

FILED

Feb 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000004894 (0)

1. Corporation Name
BINAS GUEST HOUSE, INC.



Principal Place of Business

818 FLEMING STREET
KEY WEST FL 33040
US

Mailing Address

818 FLEMING STREET
#2
KEY WEST FL 33040-6904
US

3. Date Incorporated or Qualified
10/09/1995

3a. Date of Last Report
01/25/1996

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 818 Fleming Street
Suite, Apt #, etc.

27 City & State

28 Same
Zip

30 Country

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
818 FLEMING STREET #2
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name

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

83 818 Fleming Street

84 City

Same

FL

85 Zip Code

Same

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME GALCHUTT, WILLIAM H
STREET ADDRESS 818 FLEMING STREET #2
CITY-ST-ZIP KEY WEST FL

TITLE DV ☐ DELETE

NAME BASS, STEPHEN G
STREET ADDRESS 1612 ASHLEY MILL DRIVE
CITY-ST-ZIP CHATTAHOOGA TN 37421

TITLE SD ☐ DELETE

NAME LANGSTON, JOSEPH C JR
STREET ADDRESS 818 FLEMING STREET #2
CITY-ST-ZIP KEY WEST FL

TITLE TD ☐ DELETE

NAME KOSIK, JOHN A JR
STREET ADDRESS 1612 ASHLEY MILL DRIVE
CITY-ST-ZIP CHATTAHOOGA TN 37421

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

818 Fleming Street
Same

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

LANGSTON, JOSEPH C. JR
818 Fleming Street
Same

☒ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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: Joseph C. Langton Jr 1/28/97 305 294-7775
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)