

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # F97000003798

1. Corporation Name

THE LODGE KEEPER GROUP, INC.

Principal Place of Business

217 SOUTH ELM ST.
PROSPECT OH 43342

Mailing Address

217 SOUTH ELM ST.
PROSPECT OH 43342

FILED
Mar 30, 1999 8:00 am
Secretary of State

03-30-1999 90043 007 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/21/1997

4. FEI Number

31-1103435

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4243 DUNWOODY CLUB DR.

SUITE 200

ATLANTA, GA

30350-5206

USA

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

C
NAME COLLINS, DOUG
STREET ADDRESS 4243 DUNWOODY CLUB DR.
CITY-ST-ZIP DUNWOODY GA 30350

TITLE ☐ DELETE

DP
NAME DEVINE, RONALD L
STREET ADDRESS 217 SOUTH ELM ST.
CITY-ST-ZIP PROSPECT OH 43342

TITLE ☐ DELETE

D
NAME LEE, ROBERT
STREET ADDRESS 4243 DUNWOODY CLUB DR., STE. 200
CITY-ST-ZIP DUNWOODY GA 30350

TITLE ☐ DELETE

V
NAME DEVINE, JAMES M
STREET ADDRESS 217 SOUTH ELM ST.
CITY-ST-ZIP PROSPECT OH 43342

TITLE ☒ DELETE

S
NAME CONWAY, MARSHA
STREET ADDRESS 217 SOUTH ELM ST.
CITY-ST-ZIP PROSPECT OH 43342

TITLE ☐ DELETE

T
NAME LANE, LONNIE L
STREET ADDRESS 217 SOUTH ELM ST.
CITY-ST-ZIP PROSPECT OH 43342

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/99 770-393-2662

Date

Daytime Phone #