2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

DOCUMENT # F97000003798

THE LODGE KEEPER GROUP, INC.

Principal Place of Business 4243 DUNWOODY CLUB DR SOUTH ELM ST. ひんまりいつ TOT OH 43342 SUITE 200 ATLANTA GA 30328-6028 2. Principal Place of Business 3. Mailing Address 7000 Central Pkway, NE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Suite 850 Applied For 4. FEI Number City & State City & State 31-1103435 Not Applicable <u>Atlanta, </u> \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 30328 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code City 8. 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. T CV Tou STREET ADDRESS STREET ADDRESS 217 SOUTH ELM ST. CITY-ST-ZIP CITY-ST-ZIP PROSPECT OH 43342 13. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

FILED Mar 06, 2000 8:00 am Secretary of State

03-06-2000 90095 043 ***150.00

HILE		Mat ⊓elete	HILE	.	Onango L	
NAME	COLLINS, DOUG	,	NAME	Collins, Douglas C.	•	{
STREET ADDRESS	4243 DUNWOODY CLUB DR.		STREET ADDRESS	7000 Central Pkway, NE,	Suite 850	
CITY-ST-ZIP	DUNWOODY GA 30350	i	CITY-ST-ZIP	Atlanta, GA 30328		
TITLE	DP	☐ Delete	TITLE		☐ Change	☐ Addition
NAME	DEVINE, RONALD L		NAME			1
STREET ADDRESS	217 SOUTH ELM ST.		STREET ADDRESS			
CITY-ST-ZIP	PROSPECT-OH-43342		CITY-ST-ZIP	·		
TITLE	DSV	Delete	TITLE	DSV	檱 Change	☐ Addition
NAME	LEE, ROBERT		NAME	Lee, Robert B.		
STREET ADDRESS	4243 DUNWOODY CLUB DR., STE. 200		STREET ADDRESS	7000 Central Pkway, NE,	Suíte 850	
CITY-ST-ZIP	DUNWOODY GA 30350		CITY-ST-ZIP	Atlanta, GA 30328		
TITLE	V	☐ Delete	TITLE		☐ Change	☐ Addition
NAME	DEVINE, JAMES M		NAME			
STREET ADDRESS	217 SOUTH ELM ST.		STREET ADDRESS			{
CITY-ST-ZIP	PROSPECT OH 43342	•	CITY-ST-ZIP			
TITLE	S	X Delete	TITLE	T	Change	Addition
NAME	CONWAY, MARSHA	/4 =====	NAME	Lane, Lonnie L.	, ,	
STREET AODRESS	217 SOUTH ELM ST.		STREET ADDRESS	217 South Elm St.		J
CITY-ST-ZIP	PROSPECT OH 43342		CITY-ST-ZIP	Prospect, OH 43342		
TITLE	Ť	Delete	TITLE		☐ Change	Addition
NAME	LANE LONNIE L	/ `	NAME			

Douglas 🐼 Collins

SIGNATURE:

Vice President SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

770-393-2662

Daytime Phone #