

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2006 08:00 AM
Secretary of State

DOCUMENT # F98000003131

1. Entity Name
MALBON MOTEL MANAGEMENT, INC.



Principal Place of Business
**684 ESTERO BLVD.
FORT MYERS BCH, FL 33931**

Mailing Address
**684 ESTERO BLVD.
FORT MYERS BCH, FL 33931**



02222006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
54-1899595

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MALBON, TIMOTHY G
7211 EMILY DR
FORT MYERS, FL 33908**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
MALBON, WILLIAM R JR.
500 SUSAN CONSTANT DR.
VIRGINIA BEACH, VA 23451**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
MALBON, PAUL E
684 ESTERO BLVD.
FT. MYERS BEACH, FL 33931**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
MALBON, TIMOTHY G
7211 EMILY DR.
FT. MYERS, FL 33908**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**ST
MALBON, JEFFREY M
1771 BROADWAY AVE.
FT. MYERS, FL 33908**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000484410
04/12/06-80040-019 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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 10 or Block 11 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

3-27-2006 239.463 6000
Date Daytime Phone #