FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 3:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J26378** **(6)**

1. Corporation Name
DOWNTOWN MOTEL CORPORATION

Principal Place of Business	Mailing Address
600 N. WASHINGTON BLVD. SARASOTA FL 34236 US	2375 S. TAMIAMI TR. SARASOTA FL 34239 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/30/1986
3a. Date of Last Report: 03/08/1994

2. Principal Place of Business
21:
22: Suite, Apt. #, etc.
23: City & State
24: Zip
25: Country

2a. Mailing Address
26: 2014 4TH STREET
27: Suite, Apt. #, etc.
28: SARASOTA, FL
29: Zip 34237
30: Country SARASOTA

4. FEI Number: 59-2713505 ☐ 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

KELLY, JACQUELINE
1545 BLUE HERON DR.
SARASOTA FL 33577

10. Name and Address of New Registered Agent

81 Name: BRIAN D. STRAND
82 Street Address (P.O. Box Number is Not Acceptable): 2014 4TH STREET
83:
84 City: SARASOTA FL 85 Zip Code: 34237

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] 4/28/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	KELLY, JACQUELINE	1.2 NAME	
STREET ADDRESS	1545 BLUE HERON DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	KELLY, JAMES	2.2 NAME	
STREET ADDRESS	1545 BLUE HERON DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	
TITLE	TS	3.1 TITLE	☐ Change ☐ Addition
NAME	AMBROSE, COLLISTA	3.2 NAME	
STREET ADDRESS	1545 BLUE HERON DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	KELLY, THOMAS	4.2 NAME	
STREET ADDRESS	1545 BLUE HERON DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	☐ Change ☐ Addition
NAME	DOWD, H. ROBERT	5.2 NAME	
STREET ADDRESS	515 S. WASHINGTON BLVD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	5.4 CITY-ST-ZIP	
TITLE	AS	6.1 TITLE	☒ Change ☐ Addition
NAME	FETTERMAN, JAMES C.	6.2 NAME	
STREET ADDRESS	515 S. WASHINGTON BLVD.	6.3 STREET ADDRESS	2375 S. TAMIAMI TRAIL
CITY-ST-ZIP	SARASOTA FL	6.4 CITY-ST-ZIP	SARASOTA FL 34239

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)(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: [signature] 4/28/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0943M14 CP