## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

J52505 **DOCUMENT #** 1. Corporation Name

(1)

SILVER DOLLAR INN, INC.

Principal Place of Business Mailing Address



5427 15TH S BRADENTON				5427 15TH STREET E Bradenton FL 34203								
								3. Date Incorporated or Qualified 01/20/1987	3a. Date 02	of Last /03/1		
2. Principal Place of Business				2a. Mailing Address				4. FEI Number			Applied For	
21			26	26				65-0303047			Not Applicable	
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State			28	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Ζιρ <b>24</b>	25	Country	29	Zip Country 30				8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No				
	9. Name and	Address of Current I	Regist	ered Agent				10. Name and Address of New I	Registered A	gent		
						81	Name				+	
	r, stephanie Th street e				ŀ	82	Street A	Address (P.O. Box Number is Not Accepta	ole)			
BRADEN	TON FL 3420	3			İ	83						
						84	City		FL	85	Zip Code	
or registere	ed agent, or both	of Sections 607,0502 a n, in the State of Florida e obligations of, Section	Such	change was authorize	ed by the c	ve-n	named co oration's l	rporation submits this statement for the puboard of directors. I hereby accept the app	oointment as r	nging It egister	s registered office ad agent. I am	
	Signature, typed or prin	ted name of registered agent are				Agrini	l signature re	quired when reinstabrigt	DATE			
12.		OFFICERS AND	DIREC		13.			ADDITIONS/CHANGES TO OF				
HILF	P P	TER (		☐ DELETE	1 1 1	TLE			L_	] Chang	e Addition	
NAME	TURNER, S				1.2 NA							
STREET ADDRESS	5427 15 ST				13 ST	RE& I	ADDRESS					
CITY-ST-ZIP	BRADENTO	/N FL	<del></del>		1.4 CI		T-ZIP					
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SIRFET ADDRESS												
CITY-ST-ZIP TITLE				☐ DELETE	5 4 CI		1-21			1 Chang	2 Addition	
NAME				Danie	62 NA				L.	_ =		
STREET ADDRESS							ADDRESS					
CITY-S1-ZIP	v certify that the	information supplied wit	h this t	filing is voluntarily furni	64 Cli shed and			lify for the exemption stated in Section 119	0.07(3)(k), Flor	da Sta	tutes. 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 early 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 pringed, or on an attachment with an address.

SIGNATURE:

Jun 19, 1996 (941) 756-2084