

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J71428

1. Entity Name

REBECCA'S INNS OF AMERICA, INC.

FILED
May 22, 2001 8:00 am
Secretary of State

04-24-2001 90253 029 ***150.00

Principal Place of Business
10 SUNSET TERRACE
DAYTONA BEACH FL 32118

Mailing Address
15229 LAKE AVE
GRAND HAVEN MI 49417

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2806205

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PRINCE, BECKY S
10 SUNSET TERRACE
DAYTONA BEACH FL 32118

*Becky S Prince
4 Daggett Cove
Ponce Inlet Fl.
32127*

Name

Street Address (P.O. Box Number is Not Acceptable)

City

Ponce Inlet

FL

Zip Code

32127

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME PRINCE, REBECCA SUE
STREET ADDRESS 10 SUNSET TERRACE
CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE ☒ Change ☐ Addition
NAME *Rebecca Sue Prince*
STREET ADDRESS *4 Daggett Cove*
CITY-ST-ZIP *Ponce Inlet Fl. 32127*

TITLE VP ☐ Delete
NAME MORGAN, TODD
STREET ADDRESS 10 SUNSET TERRACE
CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE ☒ Change ☐ Addition
NAME *Todd Morgan*
STREET ADDRESS *4 Daggett Cove*
CITY-ST-ZIP *Ponce Inlet Fl. 32127*

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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 11 or Block 12 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

Rebecca Sue Prince
Date *4/12/2001* Daytime Phone # *6168469574*

CFR2034 (10/00)