

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K07362

1. Entity Name
MISSION INN RESORTS, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 MAY 13 PM 1:07

Principal Place of Business
10400 CR 48
P.O. BOX 441
HOWEY-IN-THE-HILLS, FL 34737

Mailing Address
10400 CR 48
HOWEY-IN-THE-HILLS, FL 34737 US

DO NOT WRITE IN THIS SPACE



04222008 No Chg-P CR2E034 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BEUCHER, ROBERT
HWYS. 48 & 19
HOWEY-IN-THE-HILLS, FL 32737

**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 _____ DATE _____
Signature: typewritten or printed name of registered agent and fee if applicable (R.O.T.F. Registered Agent signature required when reappointing)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 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 LINE, THOMAS P. HWY. 48 & 19 HOWEY IN THE HILL, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D BEUCHER, ROBERT HWY. 48 & 19 HOWEY IN THE HILL, FL
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	

700129055797
05/12/08--01053--023 **\$50.00

**DO NOT WRITE
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: Robert Beucher
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/08

Date

352-467-8808

Daytime Phone #

5/13/08