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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # K33619

(3)

FORTUN	IE HOTELS, INC.						
Principal Place of Business Mailing Address						DEL MANUE MINISTER)
C/O JEFFREY L FORTUNE 5600 GULF BLVD ST PETERSBURG FL 33706 C/O JEFFREY L FORTUNE 5600 GULF BLVD ST PETERSBURG FL 33706 ST PETERSBURG FL 33706					Date Incorporated or Qualified	3a. Date of La	et Report
					09/20/1988	04/25/	
2. Principal Pla		2a. Mailing Address 26 5600 Gulf	Poulevard	- 1	4. FEI Number 59-2925872	}	Applied For Not Applicable
Suite, Apt. #	Sulf Boulevard , etc.	Suite, Apt. #, etc.	Dontevara			\$8	.75 Additional
22		27			5. Certificate of Status Desired		ee Required
City & State		City & State]	6. Election Campaign Financing	1 1	5.00 May Be
23 St.Pe	tersburg Beach, FI	J <mark>28 St.Petersb</mark>	urg Beach,	FL	Trust Fund Contribution 8. This corporation has liability for in	<u> </u>	ers 199 032
24 33706	25	²⁹ 33706	30		Florida Statutes XX Yes		618 183.002,
	9. Name and Address of Current		1		10. Name and Address of New Ro	gistered Agent	
81 Name Sheryl					H. Andrews		
				Address	ress (P.O. Box Number is Not Acceptable)		
5600 GULF BLVD			5600	0_Gulf_Boulevard			
ST PETERSBURG FL 33706							
			84 City			85	Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above gamed or					ersburg Beach,	YOSe of changing	33706
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.							
tamiliar with, and accept the objigations of, Section 607 1505, Florida Statutes.							
SIGNATURÉ _	Signature, typed or printed name of registered agent an	d title if applicable. (NOT	Snery1 H. E. Registered Agrint signature re	equired wh	idrews, Vice Pre		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI		
TITLE	PDS Fortune, Jeffrey L.	☆] DELETE	1. 1 TITLE			☐ Cha	nge 🗌 Addition
NAME	5500 GULF BLVD.		1.2 NAME				
STREET ADDRESS	ST PETERSBURG BCH FL		1.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	V V	T DELETE	1.4 CITY-ST-ZIP 2. 1 TITLE	~ / [Cha	nge Addition
NAME	SHERMAN, RICHARD	<u> </u>	2.2 NAME		P/AS/D	ХX	· • · ·
STREET ADDRESS	5500 GULF BOULEVARD		2.3 STREET ADDRESS		chard E. Sherman	a	
CITY-ST-ZIP	ST. PETERSBURG FL		2 4 CITY - ST - ZIP		0 Gulf Boulevard Petersburg Beac		22706
TITLE	AS	DELETE	3. 1 TITLE		C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-	Cha	inge Addition
NAME	SHERMAN, RICHARD	AA	3.2 NAME				
STREET ADDRESS	5500 GULF BOULEVARD		3.3. STREET ADORESS	İ			
CITY-ST-ZIP	ST. PETERSBURG FL		3.4 CITY - ST - ZIP	ļ <u>. </u>			
TITLE	VI FORTUNE JOAN A	DELETE	4.1 TITLE		70000179		rige Addition
NAME	FORTUNE, JOAN A.		4.2 NAME		-03/21/96010	22032	
STREET ADDRESS	5500 GULF BOULEVARD ST. PETERSBURG FL		4.3 STREET ADDRESS		***200.00		
CITY-ST-ZIP	SI. FEIENODONG FL	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	17/0	/m	Cha	nge Addition
TITLE NAME			5.1 MAME	V/S	eryl H. Andrews	□	Mge XX.
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		eryr H. Andrews 00 Gulf Boulevard	3	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		Petersburg Beach		2706
TITLE		☐ DELETE	6 1 TITLE	20.0	recersionly beach	Cha	inge Addition
NAME			62 NAME			M.	m.
STREET ADDRESS			6 3 STREET ADDRESS			7.6	20 01
CITY-ST-ZIP			64 CITY-ST-ZIP				-20-96
	certify that the information supplied with	th this filing is voluntarily furni	shed and does not our	alify for t	the exemption stated in Section 119.0	07(3)(k), Florida S	Statutes. I further

4. I do nereby certify that the information supplied with this single svoluntarily turnished and does not quality for the exemption stated in Section 119.07(3)(K), 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 AND TYPEOLOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(813)562-1202