CORPORATION Katherine Harris Secretary of State 1999

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FILED

99 APR 29 MIS: 19

ECORELARY OF STATE INCLAHASSEE, FLORIDA

DOCUMENT # L18043 1. Corporation Name IMPAC HOTEL GROUP, INC.				PALLAHASSEE, FLORIDA	INCRESARY LA STATE INCLAMASSEE, FLORIDA	
Principal Plac	e of Business	Mailing Address		C 1981/811 830-11801 1811/ 831/1 81/11 81/11 81/11 81/11 81/11 81/11 81/11 81/11 81/11 81/11 81/11 81/11 81/11	IZ BIONI ONDI ONDI BIONI (BOY	
3445 PEACHTREE RD STE 7800 3445 PEACHTREE RD STE 7800 ATLANTA GA 30326 ATLANTA GA 30326				DO NOT WRITE IN THIS	SDACE	
				3. Date Incorporated or Qualified 09/21/1989	SPACE	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-2967299	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		[27]		G. Continued C. Charles presides [1]	Fee Required	
City & Stat	e	City & State		6. Etection Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	This corporation owes the current year Inta		
24	9. Name and Address of Current	29 30	,	Personal Property Tax 10, Name and Address of New Registered A		
<u> </u>	5. Halle alla Madress di Carrelle	Kegistered Agent	81 Name	to, Marile and Address of New Registered A	gent	
CT CORPORATION SYSTEM				ddress (P.O. Box Number is Not Acceptable)		
						PLAN
			1)		, ,	
			84 City	FI	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	l I the above hamed	corporation submits this statement for the purpose of cooration's board of directors. Thereby accept the appoin	hanging its registered	
office or r	registered agent, or both, in the State o im familiar with, and accept the obligati	if Florida, Such change was authorized to Section 607,0505, Florida	orized by the corp. Statutes	oration's board of directors. Thereby accept the appoint	lment as registered	
SIGNATURE		James, Edelar, Bernedge, Florida			ĺ	
- SIGNATORE	Signature, typed or printed name of registered agent		patend April a gration i	re promise to recognize and the promise to the prom	j	
12	OFFICERS AND	A CONTRACTOR OF THE STATE OF	13.	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE.	PD	(") DELETE	113titE		[Change [Addition	
NAME	COLE, ROBERT		12NAME	}		
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CITY-ST-ZIP	ATLANTA GA 30326		14 0/17-51-200		,	
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NAME	FLANDERS, ROBERT		22 NAME	900002857	8293	
STREET ADORESS	3445 PEACHTREE RD., STE 780	<i>ю</i>	2.3 STREET ADDRESS	-04/30/990	11034001	
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NAME	COLE, CHARLES	1 0	3.2 NAME	}	Į	
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NAME	{		62NAME	(C. S. S. C. L. Manual.	

14. I hereby certify that the info indicated on this annual rep officer or director of the corp Block 12 or Block 13 if chan does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information to true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an ee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in an address, with all other like empowered.

63 STREET ADORESS

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP