


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2004 08:00 AM
Secretary of State

DOCUMENT # M97133	
1. Entity Name THREE RIVERS MOTEL, INC.	

Principal Place of Business 4891 SO SUNCOAST BLVD PO BOX 5154 HOMOSASSA SPGS, FL 34447 US	Mailing Address 4891 SO SUNCOAST BLVD PO BOX 5154 HOMOSASSA SPGS, FL 34447 US
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DO NOT WRITE IN THIS SPACE



02262004 No Chg-P CR2E034 (10/03)

4. FEI Number 23-2881024	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**VILLANOVA, WILLIAM, V
4891 S SUNCOAST BLVD
SUITE 400
HOMOSASSA, FL 34446**

**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: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	D VILLANOVA, BETTY L. 9367 SPRING COVE RD HOMOSASSA, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	D VILLANOVA, WILLIAM V. 9367 SPRING COVE RD HOMOSASSA, FL
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03/26/04-80008-011 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: William V. Villanova President 3/24/04 628-1934
Date Daytime Phone #

William V. Villanova
Betty L. Villanova