2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006
Secretary of State

DOCUMENT# M97133

Entity Name: THREE RIVERS MOTEL, INC.

Current Principal Place of Business:

4891 SO SUNCOAST BLVD
PO BOX 5154
HOMOSASSA SPGS, FL 34447 US

New Principal Place of Business:

Current Mailing Address:

4891 SO SUNCOAST BLVD
PO BOX 5154
HOMOSASSA SPGS, FL 34447 US

New Mailing Address:

FEI Number: 23-2881024 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

VILLANOVA, WILLIAM, V
4891 S SUNCOAST BLVD
HOMOSASSA, FL 34446 US

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: 03/16/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: VILLANOVA, BETTY L.,
Address: 9367 SPRING COVE RD
City-St-Zip: HOMOSASSA, FL

Title: D ( ) Delete
Name: VILLANOVA, WILLIAM V, .
Address: 9367 SPRING COVE RD
City-St-Zip: HOMOSASSA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition
Name: VILLANOVA, BETTY L.,
Address: 9367 SPRING COVE RD
City-St-Zip: HOMOSASSA, FL

Title: O (X) Change ( ) Addition
Name: VILLANOVA, WILLIAM V, .
Address: 9367 SPRING COVE RD
City-St-Zip: HOMOSASSA, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM VILLANOVA O 03/16/2006
Electronic Signature of Signing Officer or Director — Date