

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M97133

FILED
Mar 25, 2007
Secretary of State

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:

4891 SO SUNCOAST BLVD
HOMOSASSA, FL 34446 US

Current Mailing Address:

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

New Mailing Address:

PO BOX 5154
HOMOSASSA SPGS, FL 34447 US

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
HOMOSASSA, FL 34446 US

Name and Address of New Registered Agent:

VILLANOVA, WILLIAM, V
9367 SPRING COVE RD
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:

03/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

03/25/2007

Electronic Signature of Signing Officer or Director

Date