2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 03, 2004 8:00 am Secretary of State

DOCUMENT # N27559 1. Entity Name INN ROUTE, INC.			03:	-03-2004 90022 0	11 ****61.2	25
811 ZEPHYR STREET 81	ing Address 1 ZEPHYR STREET /ERNESS, FL 34450	US		440152	40	
2. Principal Place of Business 3. Mailing Address 375 W. HICKLIGHTER 90 3.25 W. KICKLIGHTER		IGHTER				
	Suite, Apt. #, etc.	··	02212004 Ch	g-NP CR2E	037 (10/03)	
	City & State	en f	4. FEI Number 65-0145795			olied For Applicable
	Zip	Country VOLUSI	A 5. Certificate of Sta	itus Desired	\$8.75 Addit	tional
6. Name and Address of Current Registe	<u> </u>			ess of New Registered		·
			Name Thomas P. CLAUSER			
ANN WIGMORE, MARY 811 ZEPHYR STREET			Street Address (P.O. Box Number is Not Acceptable)			
INVERNESS, FL 34450		32	375 W. KICKLIGHTER ROAD			
		City	KE HELEN.	F	Zip Code	244
The above named entity submits this statement for the pur the obligations of registered agent.	rpose of changing its reg			he State of Florida. I an		and accept
SIGNATORE						
SIGNATURE Signature_typed or printed name of registered agent and title if a Filling Fee is \$61.25 Due by May 1, 2004		egistered Agent signatu aign Financing	\$5.00 May Be Added to Fees	DATE		
Signature_typed or printed name of registered agent and title II a Filling Fee is \$61.25 Due by May 1, 2004 10. OFFICERS AND DIRECTOR	9. Election Campa Trust Fund Cont	egistered Agent signatural sign Financing stribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANGE	DATE	ck payable to artment of Sta	10
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indicated on this report or suppliemental 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 617, 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.

Themse P. Clauser

TREASUREA