2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000156079

City-St-Zip:

Entity Name: ENGLENMOND DAY MOTEL 9 A

FILED Dec 05, 2007 Secretary of State

Entity Name: ENGLEWOOD BAY MOTEL & APTS, INC	C.	
Current Principal Place of Business:	New Principal Place o	f Business:
69 BAY ST ENGLEWOOD, FL 34223		
Current Mailing Address:	New Mailing Address	
69 BAY ST ENGLEWOOD, FL 34223		
FEI Number: 26-0077206 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of	New Registered Agent:
GRIPPI, JOSEPH 69 BAY ST ENGLEWOOD, FL 34223 US The above named entity submits this statement for the puin the State of Florida.	urpose of changing its registered	office or registered agent, or both,
SIGNATURE:		
Electronic Signature of Registered Ager	nt	Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:
Title: D () Delete Name: GRIPPI, JOSEPH Address: 69 BAY ST City-St-Zip: ENGLEWOOD, FL 34223	Title: (Name: Address: City-St-Zip:) Change ()Addition
Title: () Delete Name: Address:) Change (X) Addition P, MELABETH A D :H RD 1B

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOSEPH GRIPPI D 12/05/2007

ENGLEWOOD, FL 34223 US