

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000164724

**Entity Name:** LAKE CITY HOTELS, INC.

**FILED**  
**Jan 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

450 SW FLORIDA GATEWAY BLVD.  
LAKE CITY, FL 32024

**New Principal Place of Business:**

**Current Mailing Address:**

450 SW FLORIDA GATEWAY BLVD.  
LAKE CITY, FL 32024

**New Mailing Address:**

**FEI Number:** 20-4098176

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PATEL, NILESH R.  
450 SW FLORIDA GATEWAY BLVD.  
LAKE CITY, FL 32024 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: PATEL, PRAVIN  
Address: 3144 US HWY 90 WEST  
City-St-Zip: LAKE CITY, FL 32055

Title: DS  
Name: PATEL, NILESH R.  
Address: 450 SW FLORIDA GATEWAY BLVD.  
City-St-Zip: LAKE CITY, FL 32024

I hereby 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 all other like empowered.

SIGNATURE: P.J.PATEL

DP

01/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date