

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2008 8:00 am
Secretary of State

03-27-2008 90036 040 ***158.75

DOCUMENT # P06000139024 1. Entity Name MAYPORT LODGING, INC.					
Principal Place of Business 1375 SOUTH THIRD STREET JACKSONVILLE BEACH, FL 32250			Mailing Address 1375 SOUTH THIRD STREET JACKSONVILLE BEACH, FL 32250		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address c/o David A. King, Attorney			
Suite, Apt. #, etc.		Suite, Apt. #, etc. 1416 Kingsley Avenue			
City & State		City & State Orange Park, FL			
Zip 32073	Country USA	4. FEI Number 20-5941135		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent NOLAN, JAMES A.P.A. 4114 HERSCHEL STREET, SUITE 105 JACKSONVILLE, FL 32240			7. Name and Address of New Registered Agent Name Jayesh Parag Street Address (P.O. Box Number is Not Acceptable) 1375 South Third Street City Jacksonville Beach FL Zip Code 32250		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Jayesh Parag		(NOTE: Registered Agent signature required when reinstating) DATE 3/20/08			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARAG, JAYESH 1375 SOUTH THIRD STREET JACKSONVILLE BEACH, FL 32250 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD PATEL, ASHISH 1375 SOUTH THIRD STREET JACKSONVILLE BEACH, FL 32250 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATEL, NILESH KUMAR 1375 SOUTH THIRD STREET JACKSONVILLE BEACH, FL 32250 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOVIND, SHIRISH 1375 SOUTH THIRD STREET JACKSONVILLE BEACH, FL 32250 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: Jayesh Parag, President					