

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000082492

Entity Name: MPL LODGINGS, INC.

FILED
Feb 18, 2008
Secretary of State

Current Principal Place of Business:

31 SARASOTA CENTER BLVD
SARASOTA, FL 34240

New Principal Place of Business:

6600 S. TAMIAMI TR.
SARASOTA, FL 34231

Current Mailing Address:

31 SARASOTA CENTER BLVD
SARASOTA, FL 34240

New Mailing Address:

6600 S. TAMIAMI TR.
SARASOTA, FL 34231

FEI Number: 26-0594830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, CLIFFORD M
2033 MAIN STREET SUITE 303
SARASOTA, FL 34237 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: LEPORE, MICHAEL
Address: 31 SARASOTA CENTER BLVD
City-St-Zip: SARASOTA, FL 34240

Title: V () Delete
Name: BANKEMPER, MARIA
Address: 31 SARASOTA CENTER BLVD
City-St-Zip: SARASOTA, FL 34240

Title: V () Delete
Name: BANKEMPER, EDWARD
Address: 31 SARASOTA CENTER BLVD
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: LEPORE, MICHAEL
Address: 6600 S. TAMIAMI TR.
City-St-Zip: SARASOTA, FL 34231

Title: V (X) Change () Addition
Name: BANKEMPER, MARIA
Address: 6600 S. TAMIAMI TR.
City-St-Zip: SARASOTA, FL 34231

Title: () Change () Addition
Name:
Address:
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: MARIA BANKEMPER

VP

02/18/2008

Electronic Signature of Signing Officer or Director

Date