FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

(1)

DOCUMENT #
1. Corporation Name

TUDOR LODGE INVESTMENTS, INC.



Principal Place of Business Mailing Address									
6056 WATER Ft. Myers f	WAY BAY DRIVE :L 33908		6056 WATERWAY BAY DRIVE FT. MYERS FL 33908						
						3. Date incorporated or Qualified 10/31/1989		.ast Re	
2. Principal Pla	ce of Business	2a. Mailing Ada	dress			4. FEI Number		T F	Applied For
21		26	···6			-00 0000000 94-3053943 Not Applicable			
Suite, Apt #. etc.		Suite, Apt.	Suite, Apt. #, etc			5. Certificate of Status Desired	_[] \$		Additional
22		27							Required
City & State		∤ ¬	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
23	Country	28 Zip	Gou	nle.		8. This corporation has liability for			
Zip 24	25	29	30	пшу			s M No	uer s	199.002,
24	9. Name and Address of Curre			Γ		10. Name and Address of New		nt	
<u></u>		maneria na en-		81	Name				
HAWKES, IAN				-	Carres Associate	ess (P.O. Box Number is Not Accepta	ible)		
	ATERWAY BAY DRIVE		82 Str			ess (F.O. Box Norriber is not Accepta	иле)		
	RS FL 33908								
								-T -:	Cada
				84	City		FL ⁸	2 Z (Code
12.		ID DISECTORS	(NOTE Projectors) 13.			ADDITIONS/CHANGES TO OF			
TOTLE	PD	ΠD	ELETE 117	IILE				hange	Add tion
NAME	HAWKES, IAN DAVID		1.2 %	λME					
STREET ADDRESS	6056 WATERWAY BAY DR.		13\$	HH	ADDRESS				
CHTY - ST - ZiP	FT. MYERS FL 33908				I - ZIF				C Addition
TITLE	SO	□ D			İ		□1 0	hange	Addition
NAME	HAWKES, SYLVIA ANN 6056 WATERWAY BAY		2 2 N						
STREET ADDRESS	FT. MYERS FL 33908				ADDRESS				
CHY-S1-ZIP TITLE	F1. MIENS FE 33900	רוח	24 U		SI-Zi ²		Пс	hange	Addition
NAME		<u></u>	32 N				L -		
STREET ADDRESS					T ACCRESS				
CITY-ST-ZIP			340	(I) - 5	ST-ZIP				
TITLE			ELETE 4.13					hange	☐ Addition
NAME			42 h	ΑΝέ					
STREET ADDRESS			4 3 S	1861	ADDRESS				
CITY-ST-ZIP					51-70				
TITLE			ELETE 5.1					Change	☐ Addition
NAME			52 N						
STREET ADDRESS					FADDRESS				
CITY - ST - ZIP		<u></u>			31-71P			Change	Addition
TITLE		<u></u>	ELETE 6.1					лапус	☐ Mandan:
NAME			l.	IAME					
STREET ADDRESS					LADDRESS				
City - St - ZiF	l		■ 640	лгү - 5	ST- ZIP				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated or this annual report or supplemental annual 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 12 or Spock 13 if changed, of the autitary ment with an address.

SIGNATURE.

SIGNATURE NO TYPED OF PAINTED NAME OF SIGNING OFFICER OR DIRECTOR