## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P26660

(1)

TUDOR LODGE INVESTMENTS, INC.

FILED Jan 24 1997 8:00am Secretary of State



Principal Place of Business 6056 WATERWAY BAY DRIVE FT. MYERS FL 33908		Mailing Addre	ess			5 telltien ith untik diene dette kull dolt ginti bibli bibli albit nibit bibli innt			
		••••	6056 WATERWAY BAY DRIVE FT. MYERS FL 33908-4443						
						3. Date Incorporated or Qualified 10/31/1989		te of Last I	Report
2. Principal P	lace of Business	2a. Mailing Ad	ddress			4. FEI Number		A	pplied For
21		26				94-3053943		N	lot Applicable
Suite, Apt.	#, elc.	Suite, Apt	#, etc.			5. Certificate of Status Desired			Additional
22		27				5. Certificate of Status Dosifed		Fee F	lequired
City & Stati	$\epsilon$	City & Sta	ite			6. Election Campaign Financing			May Be
23		28			, <del>,,,,</del>	Trust Fund Contribution	<u> </u>		to Fees
Zip	Country	Zip	ļ	Country	/	8. This corporation has liability for	intangible	tax under	s. 199.032,
24	25	29]	3	0			Yes [		
	g, Name and Address of Curre	nt Hagistered Ager	nt .	81	Name	10. Name and Address of New F	egistered A	(gent	
	KES, IAN			"	Harrie				
6056 WATERWAY BAY DRIVE FT. MYERS FL 33908				82	Street Add	lress (P.O. Box Number is Not Accepta	able)		
ri. N	MTEHS PL 33900			83	1				
				33					
				84	City		FL	<b>85</b> Zip	Code
					<u>L</u>			ЦШ	9
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	uz and 607.1508, Fi e of Florida. Such et	iorida Statutes hande was au	, the abov thorized b	e-named cor v the corpora	poration submits this statement for the ation's board of directors. I hereby acc	purpose of ept the appo	crianging sintment a	its registered s registered
agent La	m familiar with, and accept the oblig	jations of, Section 6	07.0505, Flori	da Statute	s.	• • • • • • • • • • • • • • • • • • • •	.,		
SIGNATURE									
	Sitgmature, typical or printed came of registro draig	·····	T TCM)		ent signature requ	uired when reinstating)	DATE		
12.		NO DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFF	ICERS AND		
TOTLE	PD IAM DAVED	L	JULLETE	1.1 TITLE				Change	Addition
NAME	HAWKES, IAN DAVID			1.2 NAME					
STREET ADDRESS	6056 WATERWAY BAY DR.			1.3 STREE	T ADDRESS				
CITY - ST - ZIP	FT. MYERS FL 33908			1.4 CITY	ST-ZIP			F-1 -	
TITLE	SD	L	DELETE	21 TITLE				Change	Addition
NAME	HAWKES, SYLVIA ANN			2.2 NAME					
STREET AUDRESS	6056 WATERWAY BAY			2.3 STREE	t address				
CHTY-ST-ZIF	FT. MYERS FL 33908			2.4 CITY-	ST-ZIP	<u> </u>			
TOTLE		<u>L</u>	DELETE	3.1 TITLE				Change	Addition
NAME				3.2 NAME	)				
STREET ADDRESS				3.3 STREE	T ADDRESS				
CITY-ST-ZIP				3 4. CITY-	ST-ZIP		····		
TITLE			DELETE	4.1 TITLE				Change	Addition
NAME				4. 2 NAME					
STREET ACCRESS				4.3 STREE	T ADDRESS				
CITY-ST-ZIP				4.4 CITY-	ST-ZIP				
THTLE			DELETE	5.1 TITLE				Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREE	T ADDRESS				
CITY - S1 - ZIP				5.4 CITY-					
THLE			DELETE	61 TITLE				Change	Addition
NAME				62 NAME				_	
STREET ADDRESS				1	T ADDRESS				
CHV-SI-7P				6.4 City-					
on tour	L			0.7 011 [*	OT LEU				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on 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 configuration or the feceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if manged in charge transmitted in address.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

C

030088