

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P39323

1. Entity Name

INNISFREE HOTELS, INC.

FILED
Jul 17, 2000 8:00 am
Secretary of State

07-17-2000 90073 042 ***150.00

Principal Place of Business

113 BAYBRIDGE PARK
GULF BREEZE FL 32561

Mailing Address

113 BAYBRIDGE PARK
GULF BREEZE FL 32561-4470

2. Principal Place of Business

900 S. Belline Hwy
Suite, Apt. #, etc.

3. Mailing Address

900 S. Belline Hwy
Suite, Apt. #, etc.

City & State

Mobile, AL
Zip 36609 Country F

City & State

Mobile, AL
Zip 36609 Country F

4. FEI Number

63-0970679

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVS MACQUEEN, JULIAN B. 113 BAYBRIDGE PARK GULF BREEZE FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MACQUEEN, JULIAN B. 113 BAYBRIDGE PARK GULF BREEZE FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	900 S. Belline Hwy Mobile, AL 36609	☒ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address and all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

P39323

A0067257



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 5, 2000

INNISFREE HOTELS, INC.
900 S. BELTLINE HWY.
MOBILE, AL 36609

SUBJECT: INNISFREE HOTELS, INC.
Ref. Number: P39323

We have received your document for INNISFREE HOTELS, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$150.00.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Michelle Milligan
Document Specialist

Letter Number: 600A00031470