

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Feb 06, 2001 8:00 am
Secretary of State

02-06-2001 90050 050 ***150.00

0589349

DOCUMENT # P40040

1. Entity Name

HOSPITALITY SERVICES, INC.

Principal Place of Business

**916 BUTLER DR
MOBILE AL 36693
US**

Mailing Address

**916 BUTLER DR
MOBILE AL 36693
US****915451**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
600 Fisher St
Suite, Apt. #, etc.3. Mailing Address
600 Fisher St
Suite, Apt. #, etc.City & State
Mobile, AL
Zip
36607
Country
USCity & State
Mobile, AL
Zip
36607
Country
US4. FEI Number **57-0918572**Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE CO.
1201 HAYES STREET
TALLAHASSEE FL 32301**

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, 2001 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
**PST
JOHNSON, B STEPHEN
916 BUTLER DR
MOBILE AL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
JOHNSON, PAMELA
916 BUTLER DR
MOBILE AL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**600 Fisher St
Mobile, AL 36607** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**600 Fisher St
Mobile, AL 36607** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
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, with all other like empowered.

SIGNATURE:**Russell Tucker, CFO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**1-29-01**
Date**334-652-6055**
Daytime Phone #

CR2E034 (10/00)