

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 MAY -1 PM 1:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000008309 (6)

1. Corporation Name

HOSPITALITY CONCEPTS, INC.

Principal Place of Business

2955 LANDMARK WAY
PALM HARBOR FL 34684

Mailing Address

2955 LANDMARK WAY
PALM HARBOR FL 34684

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/25/1992

3a. Date of Last Report
08/10/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

2b. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

Zip

Country

4. FEI Number

59-3261251

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes

Yes ☐ No ☒

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOX, WILLIAM J
2955 LANDMARK WAY
PALM HARBOR FL 34684

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and file if applicable.

NOTE: Registered Agent signature required when resigning.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
ROGALSKI, GARY L
1055 KENSINGTON PARK DR #512
ALTAMONTE SPRINGS FL 32714

1 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
ROGALSKI, GARY L.
3750 Orange Plaza
B Egghood, OH 44122

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
FOX, WILLIAM J
2955 LANDMARK WAY
PALM HARBOR FL 34684

21 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

31 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

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 110 (7)(3)(b), 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 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 Block 13 if changed or in an attachment with an address.

SIGNATURE:

GARY L. ROGALSKI

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/18/95

Date

(216)831-0031

Telephone Number