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

PROFIT CORPORATION

WILDWOOD HOTELS, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT Secretary of State 1997 **DIVISION OF CORPORATIONS** DOCUMENT # P93000088335 (3)

FILED Mar 06 1997 8:00am Secretary of State

Principal Place of Business Mailing Address										
273 EAST STA		-	273 EAST STATE ROAD 44							
WILDWOOD FL		WILDWOOD	FL 34785-8402							
US		US					3. Date Incorporated or Qualified 12/28/1993	3a. Date of Las 02/27/1990		
2. Principal P	lace of Business	2a. Mailing	Address				4. FEI Number		Applied For	
21	I kan are the second of the se	26					59-3215334		Not Applicable	
Suite Apt.	#, elc	} ¬	Suite, Apt. #, etc.				5. Certificate of Status Desired	4	5 Additional	
22			27						Required	
City & State	C	} 1	City & State				6. Election Campaign Financing		00 May Be	
23 Zip	Country	28	Т	Coun	irx		Trust Fund Contribution		ed to Fees	
24	25	29	la la	10	3		8. This corporation has liability for in	Yes \B\No	er 8. 199.032,	
	9. Name and Address of Curre			T			10. Name and Address of New Re			
RAN	SAL, ANIL			8	11	Name				
	EAST STATE ROAD 44			-	_	Ctt A-fala	(D.O. D., M	1.23		
	OWOOD FL 34785			ľ	32	Street Addr	ess (P.O. Box Number is Not Acceptab	ie)		
				8	33					
				-	14	City		les l	Zin Codo	
						-			Ip Code	
	to the provisions of Sections 607.05 egistered agent, or both in the Sta m familiar with, and accept the obli	502 and 607,1508 ite of Florida. Such igations of, Sectio	, Florida Statutes n change was au n 607.0505, Flori	s, the abo thorized da Statu	by tes	-named corp the corporat	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of changin t the appointment	g its registered as registered	
SIGNATURE	Signature, typica or oriented name of registrated a	agent and title if applicab	le. (NOTE:	Registered /	Agen	t signature requir	ed when rainstating)	DATE		
12.		ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	ORS IN 12	
TITLE	ST		DELETE	1,1 TITL	E			☐ Chan	ge 🔲 Addition	
NAME	BANSAL, ANIL			1.2 NAM	1E					
STREET ADDRESS	273 EAST STATE ROAD 44			1.3 STR	EET A	ADDRESS				
CITY - S1 - ZIP	WILDWOOD FL			1.4 CITY	_	- ZIP	**************************************			
TITLE	P		DELETE	2.1 TiTL				L Chan	ge [_] Addition	
NAME	PAL, ANIL			2.2 NAM						
STREET ADDRESS	273 EAST STATE RD 44 WILDWOOD FL			8		ADDRESS	: <u>**</u> ?			
CITY-ST-ZIP TITLE	WILDWOOD PE		DELETE	2.4 CIT		[-2 P		Chan	ge Addition	
NAME			L.J DECCIE	3.1 TETL				L Chan	INDIBOOM C Se	
STREET ADDRESS				3.2 NAM		ADDRESS				
CITY+ST-ZIP				3.3 STRE						
TITLE			DELETE	4.1 TITL		1 - ZIF		Chan	ge Addition	
NAME				4. 2 NAM					g- <u>L.</u> , radiilori	
STREET ADDRESS						ADDRESS				
CITY - ST - ZIP				4.4 CITY						
Tille	The state of the s		DELETE	5.1 TITL		<u> </u>		☐ Chan	ge Addition	
NAME				5.2 NAM	IE.				1	
STREET ADDRESS						ADORESS				
CITY - ST - ZIP				5.4 CITY	r-\$T	- ZIP				
TITLE			DELETE	6.1 TITL				☐ Chan	ge Addition	
NAME				6.2 NAM	IE.					
STREET ADDRESS				6.3 STR	EET A	ADDRESS				
CITY - ST - ZIP				6.4 CITY	- ST	- ZIP				
44 1 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	and a second for the set of the description of the second	1	ata a series at a second of	fam. Mr.			11. A 440 65(0)(1) C. 11 A			

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 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 on an attachment with an address.

SIGNATURE:

B52)-748-2000