2004 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPURT				FILED		
DOCUMENT # P94000037234						
1. Entity Name WESTERN MOTEL COMPANY				04 JUN -9	AM II: 01	
Principal Place	e of Business # Mailing Address	COO WE THE		SECRETAR	OF STATE	
1901 S. ATL	ANTIC AVENUE 1901 S. ATLANTIC AVENUE DAYTONA BEACH SHORES, FL	32118		TALLIAMASS	EE FLORIDA	
				 		
ח	O NOT WRITE IN THIS SPA	^E	04082004	No Chg-P	CR2E034 (10/03)	
DO NOT WHITE IN THIS STA		OE .	4. FEI Number 59-2348		Applied Not Ap	
			5. Certificate o	f Status Desired	\$8.75 Additional	
6. Name and Address of Current Registered Agent						
	ANN, CHARLES	-	DO-	NOT-W	RITE	
	FLANTIC AVENUE BEACH SHÖRES, FL. 32118	IN THIS SPACE				
	, I N	1		1110 01	AUL	
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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE				May 1	1 2004	
Signature, typed or printed happe of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be 4 1003788254 Added to Fee 6/11/04-01009-026 **550.00						
10.	OFFICERS AND DIRECTORS	81	, "			
TITLE NAME	P BIEDERMANN, CHARLES					
STREET ADDRESS CITY-ST-ZIP	1901 S. ATLÂNTIC AVENUE DAYTONA BEACH SHORES, FL 32118				•	
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NAME STREET ADDRESS						
CITY-ST-ZIP	The state of the s					·
TITLE NAME	1		7		•	
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CITY-ST-ZIP	<u></u>	4				
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STREET ADDRESS CITY-ST-ZIP	·			• •		
TITLE NAME						
STREET ADDRESS	Λ					
12. I hereby	certify that the information supplied with this filling does not qualify for the ex-	emption stated in Se	ection 119 07/3V	Florido Statutos	further position that the last	
12. 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 reperver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if						
onal good, or on an accompanying an appress, with all other like empowered.						

SIGNATURE: