

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000066423 (2)

1. Corporation Name

SERVICO WATERTOWN, INC.



Principal Place of Business

1601 BELVEDERE RD.  
WEST PALM BEACH FL 33406

Mailing Address

1601 BELVEDERE RD.  
WEST PALM BEACH FL 33406

3. Date Incorporated or Qualified

09/09/1994

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0516388

Applied For

Not Applicable

22

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

23

City & State

City & State

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

24

Zip

Country

29

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION FL 33324

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 title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE

NAME  
HAWTHORNE, DAVID E  
STREET ADDRESS  
1601 BELVEDERE RD.  
CITY - ST - ZIP  
WEST PALM BEACH FL 33406

1.1 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
VCFO  
KNIGHT, WARREN  
STREET ADDRESS  
1601 BELVEDERE RD.  
CITY - ST - ZIP  
WEST PALM BEACH FL 33406

2.1 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
PCFO  
BUDDMEYER, DAVID  
STREET ADDRESS  
1601 BELVEDERE RD.  
CITY - ST - ZIP  
WEST PALM BEACH FL 33406

3.1 TITLE ☒ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
VAS  
RUFFIN, ROBERT  
STREET ADDRESS  
1601 BELVEDERE RD.  
CITY - ST - ZIP  
WEST PALM BEACH FL 33406

4.1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
SVP  
MCCAULEY, RONALD  
STREET ADDRESS  
1601 BELVEDERE RD.  
CITY - ST - ZIP  
WEST PALM BEACH FL 33406

5.1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
TAS  
HALE, PHILLIP  
STREET ADDRESS  
1601 BELVEDERE RD.  
CITY - ST - ZIP  
WEST PALM BEACH FL 33406

6.1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

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 119.07(3)(k), 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PHILLIP HALE, TREASURER

4/15/96

407-689-9970

Date

Daytime Phone

CR2E034 (12/95)