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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000084212 (7)

GULFCREST MOTEL, INC.

Principal Place	of Business	Mailing Address		·····			
102 CAROLYN AVE. 102 CAROLYN AVE. PANAMA CITY BEACH FL 32407 PANAMA CITY BEACH FL			FL 32407-5805				
					3. Date Incorporated or Qualified 11/14/1994	3a. Date of Last Rep 02/14/1996	port
2. Principa! Pl	ace of Business	2a. Mailing Address		······	4. FEI Number		lied For
21		26			59-3285870	Not	Applicable
Suite Apt.		Suite, Apt #, etc.			5. Certificate of Status Desired	S8.75 Ac	
City & State 23) 	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 N Added to	
Zip 24	Country 25	<i>Z</i> ip	Country 30	,	This corporation has liability for Florida Statules	r intangible tax under s. ' □ Yes □ No	199.032,
	9. Name and Address of Cui	rent Registered Agent			10. Name and Address of New R	egistered Agent	
DAL	TON, ROBERT		81	Name			
	CAROLYN AVE.		82	Street Add	ress (P.O. Box Number is Not Accepta	hle)	
PAN	IAMA CITY BEACH FL 32407		83				
4			84	City		FL 85 Zip Co	ode
11. Pursuant to	to the provisions of Sections 607. egistered agent, or both, in the St	0502 and 607.1508, Florida State ale of Florida, Such change was	utes, the above authorized b	l e-named cor y the corpora	poration submits this statement for the attion's board of directors. I hereby acception		registered egistered
	m familiar with, and accept the of	Digations of, Section 607.0505, F	lorida Statute	S.	·		
SIGNATURE	Signature, typical or printed name of registers.	Lagent and tice if applicable (NC	DTE Registered Ag	ent signature requ	ired when reinstating)	DATE	
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS	IN 12
TITLE	Р	DELETE	1.1 TITLE			Change	Addition
NAME	Dalton, Robert H		1.2 NAME				
STREET ADDRESS	102 CAROLYN AVE.		1.3 STREE	ADDRESS			
CHTY-ST-ZiP	PANAMA CITY BEACH FL	······································	1.4 CITY - 3	ST - ZIP			
T.TL€	ST	L DELETE	2.1 TITLE			L Change	Addition
NAME	DALTON, AUDREY C		2.2 NAME				
STREET ADORESS	102 CAROLYN AVE.	****	2 3 STREE	r address			
CITY-ST-ZIP	PANAMA CITY BEACH FL		2. 4 CITY-	ST-ZIP			
TITLE		☐ DELETE	3 1 TITLE			Change	Addition
NAME			3 2 NAME		j. se	- 45	
STREET ADDRESS			3 3 STREE				
CHY-ST ZIF TITLE	de barrer	DELETE	3.4. CITY -	SI-ZIP		T Oberia	Addition
NAME		L_J D(((.)E	4.3 TITLE			Change	Agginori
STREET ADDRESS			4. 2 NAME				
CITY-ST-ZIP			4.3 STREE	J			
TITLE		DELETE	4.4 CITY-5 5.1 TITLE	SI - 718		Change	Addition
NAME		La octett	5.2 NAME			t-1 Onenge	ridulion
STREET ADDRESS			5.3 STREE	AUDBESS	•		
CHY-ST-ZIP			5.4 CITY-5				
TITLE		☐ DELETE	6.1 TITLE	01 - (IF		☐ Change	Addition
NAME			6.2 NAME			Change	radicol
STREET ADORESS				ADDRESS			
CITY-ST-ZIF			6.4 CITY-5	1			

14. Ido 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 if 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 chapped, or on an attachment with an address

SIGNATURE:

1/13/97

404-234-3328

FILED

Jan 17 1997 8:00am

Secretary of State