

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

FILED

May 08 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000093248 (0)

1. Corporation Name

GOLDEN GROUPEL MOTEL, INC.

Principal Place of Business

Mailing Address

MILE MARKER 57 1/2  
GRASSY KEY, MARATHON FL 33050

RT 1 BOX 156  
MARATHON FL 33050-9703  
US

3. Date Incorporated or Qualified  
12/23/1994

3a. Date of Last Report  
03/01/1996

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

65-0541387

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 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, ROBERT K  
2875 OVERSEAS HIGHWAY  
MARATHON FL 33050

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

Sign, Print, Type or Printed Name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PTD	TYBORCHEK, JAMES S	ROUTE 1, BOX 156	GRASSY KEY, MARATHON FL	
V	RAPALLEE, NANCY	ROUTE 2	DUNDEE NY	
S	HUMMEL, SUE	BOX 106	STEPHENSON MI	
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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2.4 CITY - ST - ZIP <td></td> <td></td> <td></td> <td></td> <td></td>					
3.1 TITLE <td></td> <td></td> <td></td> <td><input type="checkbox"/> Change</td> <td><input type="checkbox"/> Addition</td>				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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3.3 STREET ADDRESS <td></td> <td></td> <td></td> <td></td> <td></td>					
3.4 CITY - ST - ZIP <td></td> <td></td> <td></td> <td></td> <td></td>					
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6.3 STREET ADDRESS <td></td> <td></td> <td></td> <td></td> <td></td>					
6.4 CITY - ST - ZIP <td></td> <td></td> <td></td> <td></td> <td></td>					

14. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1410

CR2E034 (9/96)