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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000034454

Principal Place of Business	Mailing Address
4300 BAYOU BLVD. SUITE 12 & 13 PENSACOLA FL	PO BOX 30009 PENSACOLA FL 32503-1009

## **FILED** May 01 1998 8:00am Secretary of State

BUDGET INNS OF DEFUNIAK SPRINGS. INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/18/1996 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3385891 21 26 Not Applicable Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution Zip Country Country This corporation owes or has paid the current year Intangible Yes ☐ No 25 30 Personal Property Tax due June 30. 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FLEMING, EDWARD P 4300 BAYOU BLVD. Street Address (P.O. Box Number is Not Acceptable) **SUITE 12 & 13** 83 PENSACOLA FL 32503 84 City 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) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change ☐ Addition PATEL, KISHOR N NAME 1.2 NAME 4255 SOUTH FERNDON ROAD STREET ADDRESS 1.3 STREET ADDRESS **CRESTVIEW FL 32536** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE PATEL, ANIMESH K NAME 2.2 NAME 6911 PENSACOLA BLVD. STREET ADORESS 2.3 STREET ADDRESS PENSACOLA FL 32503 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change ☐ Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ■ DELETE Change Addition 51 TITLE NAME 5.2 NAME 5.3 STREET ADORESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6 1 TITLE NAME R 2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. 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 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 or an attachment with an address

SIGNATURE:

Animesh K. Patel 4/24/98 (850)479-3800

CR2E034