

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

FILED
May 20 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 # P96000102428 (5)

1. Corporation Name
MOUNT VERNON MOTOR LODGE, INC.



Principal Place of Business 4243 NORTHLAKE BLVD SUITE D PALM BEACH GARDENS FL 33410	Mailing Address 4243 NORTHLAKE BLVD SUITE D PALM BEACH GARDENS FL 33410-8276
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/18/1996	3a. Date of Last Report
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65-0716149		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**BAROT, DILIP
 4243 NORTHLAKE BLVD
 SUITE D
 PALM BEACH GARDENS FL 33410**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BAROT, DILIP	
STREET ADDRESS	4243 NORTHLAKE BLVD, SUITE D	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Senior Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	John F. Weir	
1.3 STREET ADDRESS	4243 Northlake Blvd.	
1.4 CITY-ST-ZIP	Palm Beach Gardens, FL 33410	
2.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Timothy P. Wheat	
2.3 STREET ADDRESS	4243-D Northlake Blvd.	
2.4 CITY-ST-ZIP	Palm Beach Gardens, FL 33410	
3.1 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Anitra D. Lanczi	
3.3 STREET ADDRESS	4243-D Northlake Blvd.	
3.4 CITY-ST-ZIP	Palm Beach Gardens, FL 33410	
4.1 TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Bruce W. Adams	
4.3 STREET ADDRESS	4243-D Northlake Blvd.	
4.4 CITY-ST-ZIP	Palm Beach Gardens, FL 33410	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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]* **Dilip Barot** 4/25/97 (5/10/1027-7988)

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