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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000034585 (4)

MY'KIA HOSPITALITY PROPERTIES, INC.

Principal Place of Business

Mailing Address

FILED Apr 23 1998 8:00am Secretary of State



8846 MARLEE ROAD 8846 MARLEE ROAD JACKSONVILLE FL 32222 JACKSONVILLE FL 32222 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/17/1997 2. Principal Place of Business 2a. Mailing Address Applied For P. O. Box 14848 Suite, Apt. #, etc. 21 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Jacksonville, Florida 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 32238 USA 24 Personal Property Tax due June 30. ☐ Yes **₩** No 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name PULLIAM, VERONICA 8846 MARLEE ROAD Street Address (P.O. Box Number is Not Acceptable) 82 JACKSONVILLE FL 32222 83 85 Zip Code City 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 it applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ___ Change Addition TITLE President NAME 1.2 NAME R. Charles Allen STREET ADDRESS 1.3 STREET ADDRESS 2227 Hillside Rd CITY-ST-ZIP Tallahassee, FL 32314 1.4 CITY-ST-ZIP Change Addition TITLE 217018 Vice President/Sec NAME 22 NAME Veronica Pulliam STREET ADDRESS 23 STREET ADDRESS 8846 Marlee Rd Jacksonville, FL 32222 CITY-ST-ZIP 2.4 CITY-ST-ZIP Change TITLE 3.1 TITLE ☐ Addition Director 3.2 NAME Scott L. Allen STREET ADDRESS 3.3 STREET ADDRESS 2227 Hillside Rd CITY-ST-ZIP Tallahassee, FL 32314 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 51 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Chance DELETE TITLE 6.1 TITLE -04/24/38--01018--024 NAME 6.2 NAME ***150.00 STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST- ZIP

14. Thereby 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 of rustee 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.

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4/11/00