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 # P97000069359 (2)

GRAND INN OF NAPLES, INC.

Principal Place of Business	Mailing Addross			
3838 TAMIAMI TRAIL NORTH SUITE 410 NAPLES FL 34103	3838 TAMIAMI TRAIL NORTH SUITE 410 NAPLES FL 34103	DO NOT WRITE IN THIS S		
		3. Date Incorporated or Qualified 08/11/1997		
Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 45-0716255		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			

FILED Feb 27 1998 8:00am Secretary of State



SUITE 410 NAPLES FL 34103		SUITE 410 Naples FL 34103		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified		
					08/11/1997		
 j	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21	H - A -	26]			<i>65-0116255</i>		lot Applicable
Suite, Apt.	W, EIC.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
City & State		City & State					Required
23		in him in the control of the control			Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country	28	Country	,			to Fees
24	25	29	30	,	 This corporation owes or has paid the corporation of the personal Property Tax due June 30. 		No No
29]	9. Name and Address of Curren		130		10. Name and Address of New Registered		140
CO	NROY, J. THOMAS III		81	Name	**************************************		· ·
	18 TAMIAMI TRAIL NORTH		_	A			
	TE 410		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
	PLES FL 34103		83		· · · · · · · · · · · · · · · · · · ·		
13/3	122012 04100		ļ.,			, ,	<u>.</u>
			64	City	FI	65 Zip	Code
11. Pursuant t	to the provisions of Sections 607.050	2 and 607 1508, Florida Statute	es, the abov	e-named cor	rporation submits this statement for the purpose	of changing	its registered
office or re	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such change was a itions of Section 607 0505. Flo	authorized b	y the corpora	ation's board of directors. I hereby accept the ap	pointment a	s registered
•	The time with, and about the civilge	mento in, electron our lebes, ric	mod Oldiolo	.			
SIGNATURE	Signature, typed or printed name of registered age	ot and title if applicable (NOTE	E Registered Ag	ent signature requ	uired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	RS IN 12
TITLE	D	☐ DELFTE	1 1 TITLE			Change	Addition
NAME	KESSUS, MICHAEL		1.2 NAME				ļ
STREET ADDRESS	3838 TAMIAMI TRAIL NORTH	STE 410	1.3 STREE	ADDRESS			ŀ
CITY-ST-ZIP	NAPLES FL 34103		1.4 CHY-5	ST-ZIP			<u></u>
TITLE		☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME			2.2 NAME		i i i i i i i i i i i i i i i i i i i		
STREET ADDRESS			2.3 STALE	ADDRESS	•		
CITY-ST-ZIP			2. 4 CiTY-	ST-ZIP		110	1111111111
TITLE		DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				ł
STREET ADDRESS			3.3 STREET				
CITY-ST-ZIP TITLE		DELFTE	3.4. CITY- 4.1 TITLE	ST-ZIP		Change	Addition
NAME			4.1 MAME			L., Ullange	
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP				i			
TITLE		DELETE	4.4 City - 5 5.1 Title	51 - ZIP		Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY - 5				
TITLE		DELETE	6.1 TITLE	71 - TIL		Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			ì
CITY OF 31D		١	CA OITH A				

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 of the decriver 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 or attachment with an address.

SIGNATURE:

2/24/98

941-649-1230