

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000091959

FILED
Apr 22, 2005
Secretary of State

Entity Name: TRIPART ACCOMODATIONS, INC.

Current Principal Place of Business:

400 EAST GOVERNMENT STREET
PENSACOLA, FL 32501

New Principal Place of Business:

627 EAST GOVERNMENT STREET
PENSACOLA, FL 32502

Current Mailing Address:

400 EAST GOVERNMENT STREET
PENSACOLA, FL 32501

New Mailing Address:

627 EAST GOVERNMENT STREET
PENSACOLA, FL 32502

FEI Number: 59-3479196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTESS, GEORGE W
400 EAST GOVERNMENT STREET
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

ESTESS, GEORGE W
627 EAST GOVERNMENT STREET
PENSACOLA, FL 32502 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

04/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KERRIGAN, ROBERT G
Address: 400 EAST GOVERNMENT STREET
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: ESTESS, GEORGE W
Address: 400 EAST GOVERNMENT STREET
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: RANKIN, WILLIAM
Address: 400 EAST GOVERNMENT STREET
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KERRIGAN, ROBERT G
Address: 627 EAST GOVERNMENT STREET
City-St-Zip: PENSACOLA, FL 32502

Title: D (X) Change () Addition
Name: ESTESS, GEORGE W
Address: 627 EAST GOVERNMENT STREET
City-St-Zip: PENSACOLA, FL 32502

Title: D (X) Change () Addition
Name: RANKIN, WILLIAM
Address: 400 EAST GOVERNMENT STREET
City-St-Zip: PENSACOLA, FL 32502

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE W. ESTESS

D

04/22/2005

Electronic Signature of Signing Officer or Director

Date