

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90069 019 ***150.00

DOCUMENT # 99000050148

1. Entity Name

Kelco Gold Street Hotels, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2700 S. Commerce Parkway

3. Mailing Address

SAME

Suite, Apt. #, etc.
313

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Weston, FL

City & State

4. FEL Number

65-0924298

Applied For

Not Applicable

Zip
33331

Country

Zip

Country

5. Certificate of Status Desired ☐

**-\$8.75 Additional
Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Kelley D. SLAY

Street Address (P.O. Box Number is Not Acceptable)

2700 S. Commerce PARKWAY, Ste 313

City

Weston

FL

Zip Code
33331

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Kelley D. SLAY
2494 Princeton Ct.
Weston, FL 33327

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S.D. Richard J. Spillett
17 DUNDAS CIRCLE
PALM BCH. GARDENS, FL 33418

TITLE
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IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Kelley D SLAY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/16/02 9543842428

CR2E034B (12/01)