

2002 UNIFORM BUSINESS REPORT (UBR)

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

03-14-2002 90031 033 ***150.00

0586880 AT

DOCUMENT # P99000079036

1. Entity Name

INN-SPECTIONS OF CENTRAL FLORIDA, INC.

Principal Place of Business

**302 ACADIA LANE
 CELEBRATION FL 34747**

Mailing Address

**POST OFFICE BOX 470024
 CELEBRATION FL 34747**

2. Principal Place of Business

1295 WHEELING WAY

Suite, Apt. #, etc.

3. Mailing Address

PO Box 60

Suite, Apt. #, etc.

City & State
LADY LAKE FLORIDA

Zip
32162

Country
USA

City & State
LADY LAKE FLORIDA

Zip
32158

Country
USA

4. FEI Number

59-3597747

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**ANDERSON, RICHARD C
 302 ACADIA LANE
 CELEBRATION FL 34747**

7. Name and Address of New Registered Agent

Name **RICHARD C. ANDERSON**

Street Address (P.O. Box Number is Not Acceptable)
1295 WHEELING WAY

City **LADY LAKE**

FL

Zip Code
32162

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

RICHARD C. ANDERSON

2-1-2002

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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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 **P** ☐ Delete
 NAME **ANDERSON, RICHARD C**
 STREET ADDRESS **302 ACADIA LANE**
 CITY-ST-ZIP **CELEBRATION FL 34747**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
 NAME **RICHARD C. ANDERSON**
 STREET ADDRESS **1295 WHEELING WAY**
 CITY-ST-ZIP **LADY LAKE FLORIDA 32162**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME
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 CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/2002

352 753 3330

Date

Daytime Phone #

CR2E034 (9/01)