

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 26, 2001 08:00 AM**
Secretary of State**DOCUMENT # S50877**1. Entity Name
TEMPORARY LODGING CORPORATION., INC.Principal Place of Business
815 S. MAIN STREET
6TH FLOOR
JACKSONVILLE FL 32207
USMailing Address
POST OFFICE BOX 48088
JACKSONVILLE FL 322478088
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3067062

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 AgentPRICE, ROBERT J.
815 S. MAIN ST.
6TH FLOOR
JACKSONVILLE FL 32254
US**7. Name and Address of New Registered Agent**

Name

PRICE, ROBERT J.

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

815 S. MAIN ST.

6TH FLOOR

City

JACKSONVILLE

FLZip Code
32207

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)

04/26/2001

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, 2001 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	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	Delete
COO	VAUGHN BARRY S	815 S. MAIN STREET	JACKSONVILLE	FL	<input type="checkbox"/>
V	DOYLE GEORGE W	815 S. MAIN STREET	JACKSONVILLE	FL	<input checked="" type="checkbox"/>
CD	BELL, A. QUINN	815 S. MAIN STREET	JACKSONVILLE	FL	<input type="checkbox"/>
VPTD	PRICE, ROBERT J.	815 S. MAIN STREET	JACKSONVILLE	FL	<input type="checkbox"/>
SD	STRICKLAND, BARBARA S.	815 S. MAIN STREET	JACKSONVILLE	FL	<input type="checkbox"/>
DCEO	SUDDATH, STEPHEN M.	815 S. MAIN STREET	JACKSONVILLE	FL	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	32207	Change	Addition
COO	VAUGHN BARRY S	815 S. MAIN STREET	JACKSONVILLE	FL	32207	<input checked="" type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
CD	BELL, A. QUINN	815 S. MAIN STREET	JACKSONVILLE	FL	32207	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VPTD	PRICE, ROBERT J.	815 S. MAIN STREET	JACKSONVILLE	FL	32207	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SD	STRICKLAND, BARBARA S.	815 S. MAIN STREET	JACKSONVILLE	FL	32207	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DCEO	SUDDATH, STEPHEN M.	815 S. MAIN STREET	JACKSONVILLE	FL	32207	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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: ROBERT J. PRICE

V

04/26/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)