## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$88442

(6)

Mailing Address

TOWN AND COUNTRY MOTEL, INC.

FILED
May 15 1997 8:00am
Secretary of State



150 NW 35 CT OAKLAND PAR		150 NW 35 CT OAKLAND PARK FL 3330	0.5210			
CNAR	USIDESS MOTELIN	x. 17/26/95	· •			
WANTS	KEEP CORPORATION I TO BUY ANOTHER A ace of Businuss OALLAN	NORDER BUSINESS OF	ak LAWA	PARK PL	3. Date Incorporated or Qualified 10/21/1991	3a. Date of Last Report 05/02/1996
2. Principal Pla	ace of Business OAKLAP	2a. Mailing Address			4. FEI Number	Applied For
21 150 N	W35 cT, PARKTLA.	26 150NW 35CT	FLA. 3	3309	59-3088686	Not Applicable
Surie, Apt. :	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		^	6. Election Campaign Financing	\$5.00 May Be
23		28 CAKLAND F	ARK FL		Trust Fund Contribution	Added to Fees
Zip	Country	Z <sub>10</sub>	Countr		8. This corporation has liability for i	
24	25	29 33309	30	SA.		Yes X No.
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  ECOPTIED DE ICAN I 81 Name						
rontien, neuchi u.						
150 NW 35 CT				ess (P.O. Box Number is Not Acceptat	le)	
OAKLAND PARK FL 33308  Rejean J. Fortier OAKLAND PARK 83  150NW 35CT FLA. 33309  150NW 35CT FLA. 33309  FL 85 Zip Code						
Ke	rean & Borber	MAKLANDI	MAK	1		
1	2007	TILA 22209	84	City		85 Zip Code
1,500	o the provinces of Sections 607.050	2 and 607 1500 Florida Statut	ton the abov	10 pamed corps	oration cubalite this statement for the r	FL of changing its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
	Signature: typed or printed name of registered age OFFICERS AN		TE: Registered Ac	gent signature require	ad when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE
12.	D OFFICERS AIN	D DINECTORS DELETE	1.1 TITLE	12		
	FORTIER, REJEAN J.	□ percir	ı	$\mathcal{L}$	PESIDED OF THE	C Diango C Padillon
NAME	150 NE 35 CT		1.2 NAME	9	Kellan J. Sprill	*
STREET ADDRESS	OAKLAND PARK FL 33309			ET ADDRESS	5000 250T DAKI	AUD BOVEID
C-TY - ST - ZIP	OANDARD PARK I'C 35508	DELETE	1.4 CiTY-	ST-ZIP / C	Plesi DEUT Réjean J. Fritie 50 NW 35CT. OAKL	Change Addition
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NAME		•	2.2 NAME			
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CITY - S1 - ZIP		DELETE	4.4 CITY- 5.1 TITLE			Change Addition
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NAME			5 2 NAME	- 1		
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TITLE		☐ DELETE	61 TITLE			El CHANGE El ADDITION
NAME			62 NAME	l		
STREET ADDRESS			6.3 STREE	et address		
CITY-ST-ZIP			6.4 CITY			A final constitution of the state of the sta
I 14 Ldo boret	au cartifu that the information punction	a with this filing dose not avail	inu for the ev	betete notromer	Lin Section 119.07(3)(i). Florida Statute	s i turther certify that the

1. I do hereby certify that the information supplied with this filing does not quality 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 or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

4/28/97

954-630-9714