FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # V01997

(8)

1. Corporation Name HERITAGE HOTEL HOLDING COMPANY Principal Place of Business PO BOX 15707 ST PETERSBURG FL 33733 US PO BOX 15707 ST PETERSBURG FL 33733 US								
03		03			3. Date Incorporated or Qualified 12/23/1991	3a. Date of Last 05/01/19		
2. Principal Place of Business 21		2a. Mailing Address					Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	• ** ** · · · · · · · · · · · · · · · ·		\$8.75 Additional		Not Applicable 5 Additional	
22		27	- 		5. Certificate of Status Desired	1 1	Required	
City & State		City & State	} 1		6. Election Campaign Financing Trust Fund Contribution S5.00 May Be Added to Fees			
Zφ	Country	Zip	Country		8. This corporation has liability for		s 199.032,	
24 25 29 9. Name and Address of Current Registered Agent			30	30 Florida Statutes X Yes No 10, Name and Address of New Registered Agent				
	g. Hama and Addieds of Carre	it ricgistered rigent	81	Name	(U) Name and Address of feet in	legistered Agent		
DELANO), G KRISTIN		82	Ctroot	didress (P.O. Box Number is Not Acceptab	NA)		
360 CENTRAL AVE			52 Street Add		digress (F.O. Dox Namber is Not Acceptate	nc)		
ST PETE	ERSBURG FL 33701		83					
			84	City		 85 2	Zip Code	
44 Duramant	to the provisions of Continue 507 650	Front 607 4500 Florida Phylid			poration submits this statement for the pur loard of directors. Thereby accept the app	FL °°	4.6	
SIGNATURE	th, and accept the obligations of, Sec Square South or protect name of reproducing			Separature re	ADDITIONS/CHANGES TO OFF	DA'E	ORS IN 12	
TITLE	BRUBAKER, RICHARD M. 360 CENTRAL AVE ST. PETERSBURG FL		1. 1 T TLE	1	D/P	Change		
NAME			1.2 NAME 1.3 STREET ADDRESS 3 1.4 C(TY-ST-Z)P S		BRUBAKER, RICHARD M.	·		
STREET ADDRESS					360 Central Avenue St. Petersburg, FL			
CITY - ST - ZIP								
TITLE	SV Southey, Robert G.	DEFELE	2 1 TeTLE		D/S/T)	Change	Addition	
NAME CARGEL AGRESSO	360 CENTRAL AVENUE ST. PETERSBURG FL		2.3 STREET ADDRESS 3		MOORÉ, SCOT E.			
STREET ADDRESS CITY - ST - ZIP					360 Central Avenue			
TITLE		[] DELETE	3 1 T:TLF	1 - 2 IF	St. Petersburg, FL	Change	Addition	
NAME			3.2 NAME	3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3 4 CITY - S	- ZIP				
TITLE		☐ DELETE	4 1 TITLE			☐ Change	Add-tion	
NAME			4.2 NAME					
STREET ADDRESS			4 3 STREET ADDRESS		700001798127 -04/29/9601032011			
CITY-ST-7IP			4 4 CITY - S	r- ZIP	 			
TITLE	☐ DELETE		5 1 TITLE		本本本「もりし」UU Change		Addition	
NAME STREET ADDRESS			5.2 NAME	ALCORIGE .				
CITY-ST-ZIP			53STREET	1				
T:TLE		T DELETE	5 4 CHY-S 6 1 TIFLE	- 111		Change	Addition:	
NAME		<u> </u>	6 2 NAME) ~	
STREET ADDRESS			6.3 STREET	ADDRESS			4.21	

6 4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 67(3)(k). 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 thy 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 12 or Block 13 if charged, or of an attaching with an address

SIGNATURE: _

SIGNATURE AND THE OWNER INTED HAME OF SIGNING OFFICER OR DIRECTOR

(813) 823-4000 ext.4253

Daytone Phone I

CR2E034 (12/95)