

2002 UNIFORM BUSINESS REPORT (UBR)

0451340 AV

DOCUMENT # V01997

1. Entity Name
HERITAGE HOTEL HOLDING COMPANY

FILED

02 APR 11 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

PO BOX 15707
ST PETERSBURG FL 33733
US

Mailing Address

PO BOX 15707
ST PETERSBURG FL 33733
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

59-3099782

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~DELANO, G. KRISTIN~~
360 CENTRAL AVE
ST PETERSBURG FL 33701

Name David B. Snyder

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

360 Central Ave.

City

St. Petersburg,

FL

Zip Code

33701

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

David B. Snyder, Esq.

3/15/02

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D/P
NAME BRUBAKER, RICHARD M
STREET ADDRESS 360 CENTRAL AVE
CITY-ST-ZIP ST. PETERSBURG FL 33701 ☐ Delete

TITLE AS
NAME Haire, Nancy C.
STREET ADDRESS 360 Central Ave.
CITY-ST-ZIP St. Petersburg, FL 33701 ☐ Change ☒ Addition

TITLE DS
NAME SNYDER, DAVID B
STREET ADDRESS 360 CENTRAL AVENUE
CITY-ST-ZIP ST. PETERSBURG FL 33701 ☐ Delete

TITLE AS
NAME Southey, Robert G.
STREET ADDRESS 360 Central Ave.
CITY-ST-ZIP St. Petersburg, FL 33701 ☐ Change ☒ Addition

TITLE V
NAME DELANO, G. KRISTIN
STREET ADDRESS 360 CENTRAL AVE
CITY-ST-ZIP ST. PETERSBURG FL 33701 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400005389804--1
-04/30/02--01020--001
7972.75 *150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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

Nancy C. Haire

3/15/02

727 823-4000

Assistant Secretary

Daytime Phone #

CR2E034 (9/01)