2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V73949

Entity Name: BOWLING GREEN HOTEL ASSETS, INC.

FILED Jan 10, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 33547 325 FIFTH AVE INDIALANTIC, FL 32903 SUITE 207

INDIALANTIC, FL 32903

Current Mailing Address: New Mailing Address:

P.O. BOX 33547 INDIALANTIC, FL 32903

FEI Number: 58-2016388 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOONIN, LAUREN B. 325 FIFTH AVE STE 207 INDIALANTIC, FL 32903 US

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.

III the State of Florida

SIGNATURE: Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so ().

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: HENDERSON, CHARISSE A HENDERSON, CHARISSE A Name: Name: 325 FIFTH AVENUE 325 FIFTH AVENUE SUITE 207 Address: Address: City-St-Zip: INDIALANTIC, FL City-St-Zip: INDIALANTIC, FL 32903 US

Address: 4116 N. OCEAN DR., #700 Address: 4116 N. OCEAN DR., #700
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308 US

Title: STD () Delete Title: STD (X) Change () Addition

Name:KOONIN, LAUREN B.,Name:KOONIN, LAUREN BAddress:325 FIFTH AVEAddress:325 FIFTH AVE SUITE 207City-St-Zip:INDIALANTIC, FLCity-St-Zip:INDIALANTIC, FL32903 US

Title: PD () Delete Title: PD (X) Change () Addition Name: VOLKERT, LEON H. Name: VOLKERT, LEON H

Address: 4116 N OCEAN DR., #700 Address: 4116 N OCEAN DR., #700

City-St-Zip: LAUDERDALE BY THE SEA, FL City-St-Zip: LAUDERDALE BY THE SEA, FL 33308 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAUREN B. KOONIN ST 01/10/2002