

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000028624

**Entity Name:** MADDO HOSPITALITY, INC.

**Current Principal Place of Business:**

113 BAYBRIDGE DRIVE  
GULF BREEZE, FL 32561

**Current Mailing Address:**

113 BAYBRIDGE DRIVE  
GULF BREEZE, FL 32561

**FEI Number: 45-4879804**

**Certificate of Status Desired: No**

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

CAMPBELL, JAMES S  
BYRD CAMPBELL, P.A.  
180 PARK AVENUE NORTH - STE.2A  
WINTER PARK, FL 32789 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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name STRAUSS, THOMAS  
Address 1105 N MARKET STREET SUITE 1300  
City-State-Zip: WILMINGTON DE 19801

Title D  
Name LANGAN, WILLIAM  
Address 1105 N MARKET STREET SUITE 1300  
City-State-Zip: WILMINGTON DE 19801

Title D  
Name MACQUEEN, JULIAN  
Address BAYBRIDGE PROFESSIONAL PARK,  
BUILDING 113  
City-State-Zip: GULF BREEZE FL 32561

Title D  
Name BUTLER, HARLAN R  
Address BAYBRIDGE PROFESSIONAL PARK,  
BUILDING 113  
City-State-Zip: GULF BREEZE FL 32561

Title D  
Name RUBEN, CAROL  
Address BAYBRIDGE PROFESSIONAL PARK,  
BUILDING 113  
City-State-Zip: GULF BREEZE FL 32561

Title CFO  
Name MOORE, S BROOKS  
Address BAYBRIDGE PROFESSIONAL PARK,  
BUILDING 113  
City-State-Zip: GULF BREEZE FL 32561

*I hereby 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 all other like empowered.*

**SIGNATURE: CAROL RUBEN**

**AUTHORIZED AGENT FOR 02/25/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date