

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S20577

**Entity Name:** COLONY INN, INC.

**Current Principal Place of Business:**

419 E GULF DR  
SANIBEL, FL 33957

**Current Mailing Address:**

419 E GULF DR  
SANIBEL, FL 33957

**FEI Number:** 65-0058239

**Certificate of Status Desired:** No

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

DEKKER, BETSY HMS  
419 E GULF DR  
SANIBEL, FL 33957 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           DIRECTOR  
Name           SCHERER, LINDA  
Address        11 WHIG ST  
City-State-Zip: TRUMANSBURG NY 14886

Title           TREASURER  
Name           ROSS, MARY J  
Address        691 DEERHORN TRAIL  
City-State-Zip: YELLOW SPRINGS OH 45387

Title           P  
Name           JACOB, ANDREW  
Address        1417 SANDPIPER CIRCLE  
City-State-Zip: SANIBEL FL 33957

Title           SECRETARY  
Name           MCNAMARA, BRIAN  
Address        42 STONEBRIDGE COURT  
City-State-Zip: MANDEVILLE LA 70448

Title           VP  
Name           TAYLOR , MALLORY  
Address        8396 DINES ROAD  
City-State-Zip: NOVELTY OH 44072

*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:** ANDREW JACOB

**PRESIDENT**

**01/16/2018**

Electronic Signature of Signing Officer/Director Detail

Date