2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000001036

Entity Name: INNVISION HOSPITALITY INC.

Current Principal Place of Business:

504 CARVER RD

GRIFFIN. GA 30224-3936

Current Mailing Address:

504 CARVER RD

GRIFFIN. GA 30224-3936 US

FEI Number: 20-0651285 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

FILED Feb 04, 2019

Secretary of State

0151536407CC

Officer/Director Detail :

Title DIRECTOR Title DIRECTOR HALL, ROBERT Name Name RAHN, HAL 504 CARVER RD Address

504 CARVER RD Address

City-State-Zip: GRIFFIN GA 30224-3936 GRIFFIN GA 30224-3936 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name MCGRAW, STEVE Name AUSBAND, EDDIE Address 504 CARVER RD Address 504 CARVER RD

GRIFFIN GA 30224-3936 City-State-Zip: City-State-Zip: GRIFFIN GA 30224-3936

Title CHAIRMAN, VP Title **PRESIDENT**

Name JONES, WALTER E JR Name PARKER, CHRISTOPHER W

Address 504 CARVER RD Address 504 CARVER RD

City-State-Zip: GRIFFIN GA 30224-3936 GRIFFIN GA 30224-3936 City-State-Zip:

Title SALES TAX DIRECTOR Title SECRETARY, TREASURER Name MORRISON, SANDRA SCHWANBECK, ANDREW L Name 504 CARVER RD Address

Address 504 CARVER RD

City-State-Zip: GRIFFIN GA 30224-3936 GRIFFIN GA 30224-3936 City-State-Zip:

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 L. SCHWANBECK

SECRETARY

02/04/2019

Electronic Signature of Signing Officer/Director Detail

Date