#### 2017 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F16000002115

Entity Name: RESORT HOSPITALITY SOLUTIONS INC.

**FILED** Jul 24, 2017 **Secretary of State** CC0273683614

# **Current Principal Place of Business:**

ONE VANCE GAP ROAD ASHEVILLE, NC 28805

# **Current Mailing Address:**

ONE VANCE GAP ROAD ASHEVILLE, NC 28805 US

FEI Number: 47-4651391 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 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 Title PRESIDENT, DIRECTOR HORTON, WILLIAM W III Name PATENOTTE, DENNIS Name ONE VANCE GAP ROAD Address ONE VANCE GAP ROAD Address City-State-Zip: ASHEVILLE NC 28805 ASHEVILLE NC 28805 City-State-Zip:

Title DIRECTOR Title SECRETARY, TREASURER

Name PATRICK, HERBERT H. JR. Name LAMPKIN, LAURA Address ONE VANCE GAP ROAD Address ONE VANCE GAP ROAD ASHEVILLE NC 28805

City-State-Zip:

۱/P Title

City-State-Zip:

Name BRANNON, ADAM **521 COLLEGE STREET** Address City-State-Zip: ASHEVILLE NC 28801

ASHEVILLE NC 28805

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: DENNIS PATENOTTE

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

07/24/2017

Date