## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J61437

Entity Name: AMERICAN INN OF COLUMBIA COUNTY, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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VARSHA PATEL AMERICAN INN C/O ARVIND PATEL 4295 EISENHOWER 4295 EISENHOWER HOFFMAN ESTATES, IL 60192 HOFFMAN ESTATES, IL 60192

New Mailing Address: **Current Mailing Address:** 

VARSHA PATEL AMERICAN INN C/O ARVIND PATEL 4295 EISENHOWER CIR. 4295 EISENHOWER CIR. HOFFMAN ESTATES, IL 60192 HOFFMAN ESTATES, IL 60192

FEI Number: 59-1792440 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRANNON, BROWN, HALEY, ROBINSON & COLE, PA 10 N COLUMBIA STREET ATTN MR. BILL HALEY LAKE CITY, FL 320550922 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

Name and Address of New Registered Agent:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

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

Title: PATEL, VARSHA PATEL, ARVIND Name: Name: 4295 EISENHOWER CIRCLE 4295 EISENHOWER CIRCLE Address: Address:

City-St-Zip: HOFFMAN ESTATES, IL 60192 City-St-Zip: HOFFMAN ESTATES, IL 60192

( ) Delete Title: PD Title: PD (X) Change ( ) Addition Name: PATEL, VARSHA Name: PATEL. ARVIND

4295 EISENHOWER CIRCLE 4295 EISENHOWER CIRCLE Address: Address: HOFFMAN ESTATES, IL 60192 HOFFMAN ESTATES, IL 60192 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ARVIND PATEL **PRES** 04/30/2008