

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J61437

FILED  
Apr 15, 2012  
Secretary of State

**Entity Name:** AMERICAN INN OF COLUMBIA COUNTY, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

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

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

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

**OFFICERS AND DIRECTORS:**

Title: SD  
Name: PATEL, ARVIND  
Address: 4295 EISENHOWER CIRCLE  
City-St-Zip: HOFFMAN ESTATES, IL 60192

Title: PD  
Name: PATEL, ARVIND  
Address: 4295 EISENHOWER CIRCLE  
City-St-Zip: HOFFMAN ESTATES, IL 60192

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: ARVIND PATEL

P

04/15/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date