

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04808

**Entity Name:** CABOT LODGE, INC.

**Current Principal Place of Business:**

1000 RED FERN PLACE  
FLOWOOD, MS 39232

**Current Mailing Address:**

1000 RED FERN PLACE  
FLOWOOD, MS 39232 US

**FEI Number:** 65-0698251

**Certificate of Status Desired:** No

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

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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:** INCORP SERVICES

02/08/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD	Title	VSD
Name	JONES III, EARLE F.	Name	STURDIVANT, GAINES P.
Address	1000 RED FERN PLACE	Address	1000 RED FERN PLACE
City-State-Zip:	FLOWOOD MS 39232	City-State-Zip:	FLOWOOD MS 39232
Title	CD	Title	VT
Name	STURDIVANT, J. WALKER	Name	HART, MICHAEL J.
Address	DUE WEST ROAD	Address	1000 RED FERN PLACE
City-State-Zip:	GLENDORA MS 38928	City-State-Zip:	FLOWOOD MS 39232
Title	VP		
Name	STURDIVANT, MICAHAH		
Address	1000 RED FERN PLACE		
City-State-Zip:	FLOWOOD MS 39232		

*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:** MICHAEL J. HART

VT

02/08/2018

Electronic Signature of Signing Officer/Director Detail

Date