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ANNUAL REPORT
1995



SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F92000000253 (6)

LAKE PARK FLORIDA HOTEL CORP.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: 14180 DALLAS PARKWAY SUITE 700 DALLAS TX 75240-4376
Mailing Address: 14180 DALLAS PARKWAY SUITE 700 DALLAS TX 75240-4376

3. Date Incorporated or Qualified: 11/16/1992
3a. Date of Last Report: 03/09/1994
4. FEI Number: 65-0368125
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 c/o Ashford Financial Corp.
2a. Mailing Address: 26 c/o Ashford Financial Corp.
22. City & State: [Blank]
23. City & State: [Blank]
24. Zip: [Blank] 25. Country: [Blank]
29. Zip: [Blank] 30. Country: [Blank]

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
81 Name: [Blank]
82 Street Address (P.O. Box Number is Not Acceptable): [Blank]
83 [Blank]
84 City: [Blank] 85 Zip Code: FL [Blank]

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [Blank] DATE: [Blank]

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1011	PD FISHER, RICHARD L 299 PARK AVENUE NEW YORK NY 10017	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1012	VS EDELMAN, MARTIN L 280 PARK AVENUE NEW YORK NY 10017	12 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1013	VD LELAND, MARC 1001 19TH STREET N. ARLINGTON VA 22209	13 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1014	VP BENNETT, MONTY 14180 DALLAS PARKWAY DALLAS TX 74240	14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1015	VPT KIMICHIK, DAVID 14180 DALLAS PARKWAY DALLAS TX 74240	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1016	AS SLAYTON, JOHN 600 NEW HAMPSHIRE AVE N.W. #953 WASHINGTON DC 22209	22 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		23 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		24 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		32 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		33 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		42 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		43 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		52 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		53 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		62 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		63 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		64 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I declare by certifying that the information supplied with this block is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 on Block 12 or Block 13 of a changed or on an attachment with an address.

SIGNATURE: *David Kimichik* David Kimichik 2/19/95 214-490-9600