FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F94000004483

1. Corporation Name

LA QUINTA INVESTMENTS, INC.

				T \$00/200 (310 /10/31 010)1 Walls and a most most and a more
Principal Place of Business Mailing Address				
112 E. PECAN 112 E. PECAN				
SAN ANTONIO	TX 78205	SAN ANTONIO TX 78205		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
ļ				08/29/1994
2. Principal Pl	ace of Business	2a, Mailing Address		4. FEI Number Applied For
	FIRST AVENUE	26		74-2670490 Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		\$8.75 Additional
L	E 300	27		5. Certificate of Status Desired Fee Required
City & State	1	City & State		6. Election Campaign Financing \$5.00 May Be
23 NEE	OHAM MA Country	28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24 02/94-	9127 25	29 30		Personal Property Tax.
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Agent
			81 Na	me
C T CORPORATION SYSTEM			82 Str	reet Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD				
PLAN	ITATION FL 33324		83	
			84 Cit	85 Zip Code
				" FL ~
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				
office 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	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: Reg	gistered Agent signs	ature required when reinstating) DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	X DELETE	1.1 TITLE	D/P/T Change DAddition
NAME	MEAD, GARY L		1.2 NAME	BENSON, DAVID F. RESS 24 MIDDLETON ROAD
\$TREET ADDRESS	112 E. PECAN		1.3 STREET ADOR	ESS 24 MIDDLE TON TOURS
C/TY-ST-ZIP	SAN ANTONIO TX 78205		1.4 CITY-ST-ZIP	BOX FOR D MA 0/92/
TITLE	VSD	∑ DELETE	2.1 TITLE	NICHAEL F
NAME	SCHMUTZ, JOHN F		2.2 NAME	- 10 (F AUX/VVII) 4 0 1 2 - 1
STREET ADDRESS	112 E. PECAN		2.3 STREET ADDR	ESS 197 FIRM AVE
CITY-ST-ZIP	SAN ANTONIO TX		2. 4 CITY-ST-ZIP	
TITLE		☐ DELETË	3.1 TITLE	Change Change
NAME			3.2 NAME	GERBER, LAURE TUITE 700
STREET ADDRESS			3.3 STREET ADDR	ESS 197 FIRST AVE.
CiTY-ST-ZIP			3.4. CITY-ST-ZIP	NEEDHAY MA 02/99-9/17
TITLE		☐ DELETE	4.1 TITLE	
NAME			4. 2 NAME	DENJAMIN, MICHAEL S.
STREET ADDRESS			4.3 STREET ADDR	RESS 197 FIRST AVENUE, SUITE 300 NEEDHAM, MA 02194- 9127
CITY-ST-ZIP			4.4 CITY-ST-ZIP	NEEDHAM, MA OZIGY-9127
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
OTDEET ADODESO			5.3 STREET ADDR	RESS

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is tote and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or merceciver or durtee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed on this annual report is tote and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or merceciver or durtee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed on this annual report is tote and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or merceciver or durtee.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

1) 433-6000

Change

Addition

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90147 012 ***150.00