

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000003547

1. Entity Name

STANFORD HOTELS CORPORATION

Principal Place of Business

433 CALIFORNIA ST., 7TH FL.
SAN FRANCISCO CA 94104-2011

Mailing Address

433 CALIFORNIA ST., 7TH FL.
SAN FRANCISCO CA 94104-2016

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

94-3033518

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MR. JOHN MACKEY
7550 AUGUSTA NATIONAL DRIVE
ORLANDO FL 32822

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE CPD ☐ Delete
NAME LUI, LAWRENCE Y
STREET ADDRESS 433 CALIFORNIA ST., 7TH FL.
CITY-ST-ZIP SAN FRANCISCO CA 94104-2011

TITLE DV ☐ Delete
NAME CARTER, ANTONY
STREET ADDRESS 433 CALIFORNIA ST., 7TH FL.
CITY-ST-ZIP SAN FRANCISCO CA 94104-2011

TITLE CFO ☐ Delete
NAME EVANS, JAMES E M
STREET ADDRESS 433 CALIFORNIA ST., 7TH FL.
CITY-ST-ZIP SAN FRANCISCO CA 94104-2011

TITLE S ☐ Delete
NAME WEIBLE, JOYCE M
STREET ADDRESS 433 CALIFORNIA ST., 7TH FL.
CITY-ST-ZIP SAN FRANCISCO CA 94104-2011

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental report is true 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 the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. Weible, Joyce Weible

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/00

Date

(415) 398-3333

Daytime Phone #



DO NOT WRITE IN THIS SPACE

FILED