

2000 UNIFORM BUSINESS REPORT (UBR)

0570174

DOCUMENT # F96000006615

1. Entity Name

LIBERTY HOSPITALITY GROUP, INC.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

13 RIVERSIDE RD.
RIVERSIDE OFFICE PARK
WESTON MA 02193

13 RIVERSIDE RD.
C/O LIBERTY HOSPITALITY
WESTON MA 02493-2249
US

2. Principal Place of Business

600 Atlantic Avenue

Suite, Apt. #, etc.

3. Mailing Address

600 Atlantic Ave

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State Boston, MA 02210		City & State Boston, MA 02210		4. FEI Number 04-3096030	Applied For ☐ Not Applicable
Zip 02210-2214	Country USA	Zip 02210-2214	Country USA	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2000003246172--3 -05/10/00--01016--010 City ***150.00	
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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 _____ (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
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARINELLA, SABINO 600 ATLANTIC AVE. BOSTON MA 02210-2210 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARINELLA, SABINO 600 ATLANTIC AVE. BOSTON, MA 02210-2210 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MCCARTHY, JOHN M 13 RIVERSIDE RD. WESTON MA 02193 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MCCARTHY, JOHN M. 600 ATLANTIC AVENUE BOSTON, MA 02210-2214 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BENNING, JOHN A 600 ATLANTIC AVE. BOSTON MA 02210-2210 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER AND DIRECTOR BENNING, JOHN A. 600 ATLANTIC AVENUE BOSTON, MA 02210-2214 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT KALLANDER, KAREN L 13 RIVERSIDE RD. WESTON MA 02193 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR J. PAUL CONDRIN III 175 BERKELEY STREET BOSTON, MA 02117 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MOCERI, ANTHONY C/O LHG 13 RIVERSIDE ROAD WESTON MA ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MOCERI, ANTHONY R. 17260 HARBOUR POINTE DRIVE FORT MYERS, FLORIDA 33908 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GILVAR, BARRY C/O LHG 13 RIVERSIDE ROAD WESTON MA ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY GILVAR, BARRY S. 175 BERKELEY STREET BOSTON, MA 02117 ☒ Change ☐ Addition

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: John M. McCarthy, Executive Vice President Date: 4/10/00 Daytime Phone #: 617 371 2256

CR2E034 (9/99)