2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2002 8:00 am
Secretary of State
02-12-2002 90105 047 ***150.00

0400462 AV

DOCUMENT # P00000068269

1. Entity Name
INNKEEPERS FLORIDA MANAGEMENT, INC.

Principal Place of Business	Mailing Address
302 ROYAL POINCIANA WAY PALM BEACH FL 33480	302 ROYAL POINCIANA WAY PALM BEACH FL 33480

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE
65-1027259

4. FEI Number ~~65-0826461~~ Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FISHER, JEFFREY H 302 ROYAL POINCIANA WAY PALM BEACH FL 33480	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, 2002 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete FISHER, JEFFREY 302 ROYAL POINCIANA WAY PALM BEACH FL 33480	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ☒ Delete LANGLEY, JOHN 302 ROYAL POINCIANA WAY PALM BEACH FL 33480	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES ☐ Change ☒ Addition WEBB, RANDALL 302 ROYAL POINCIANA WAY PALM BEACH, FL 33480
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ☐ Delete POLLAK, ROGER 302 POYAL POINCIANA WAY PALM BEACH FL 33480	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ☐ Delete COHEN, PHILIP 302 ROYAL FPOINCIANA WAY PALM BEACH FL 33480	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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: Roger A. Pollak REQUIRED 1-31-02 (561)655-9001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)