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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F92000000255 (1)**

1. Corporation Name

VERO BEACH FLORIDA HOTEL CORP.

Principal Place of Business	Mailing Address
C/O ASHFORD FINANCIAL CORP. 14180 DALLAS PKWY., STE 700 DALLAS TX 75240-4376 US	C/O ASHFORD FINANCIAL CORP. 14180 DALLAS PKWY., STE 700 DALLAS TX 75240-4376 US

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip / Country	Zip / Country
24 / 25	29 / 30

3. Date Incorporated or Qualified: **11/16/1992**	3a. Date of Last Report: **03/01/1995**
4. FEI Number: **65-0368127**	☐ Applied For ☐ Not Applicable
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	

9. Name and Address of Current Registered Agent

P H C S
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	11 TITLE	☐ Change ☐ Addition
NAME	FISHER, RICHARD L	12 NAME	
STREET ADDRESS	299 PARK AVENUE	13 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10017	14 CITY-ST-ZIP	
TITLE	VSD ☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME	EDELMAN, MARTIN L	22 NAME	
STREET ADDRESS	280 PARK AVENUE	23 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	24 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	31 TITLE	☐ Change ☐ Addition
NAME	LELAND, MARC	32 NAME	
STREET ADDRESS	1001 19TH STREET NORTH	33 STREET ADDRESS	
CITY-ST-ZIP	ARLINGTON VA 22209	34 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME	BENNETT, MONTY	42 NAME	
STREET ADDRESS	14180 DALLAS PARKWAY	43 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	44 CITY-ST-ZIP	
TITLE	VT ☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME	KIMICHIK, DAVID	52 NAME	
STREET ADDRESS	14180 DALLAS PARKWAY	53 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	54 CITY-ST-ZIP	
TITLE	AS ☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME	SLAYTON, JOHN	62 NAME	
STREET ADDRESS	1001 19TH STREET NORTH	63 STREET ADDRESS	
CITY-ST-ZIP	ARLINGTON VA 22209	64 CITY-ST-ZIP	

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7/17/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: N/A 1995 FINAL YEAR. _____ 6/19/96 (214) 490 9600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)