

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F18000000103

**Entity Name:** LATOUR HOTELS AND RESORTS, INC.**Current Principal Place of Business:**ONE VANCE GAP ROAD  
ASHEVILLE, NC 28805**Current Mailing Address:**ONE VANCE GAP ROAD  
ASHEVILLE, NC 28805 US**FEI Number:** 26-2834248**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK, INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 US*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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title CEO/PRESIDENT/DIRECTOR  
Name STYRON, SCOTT  
Address ONE VANCE GAP ROAD  
City-State-Zip: ASHEVILLE NC 28805

Title TREASURER/DIRECTOR  
Name PATENOTTE, DENNIS  
Address ONE VANCE GAP ROAD  
City-State-Zip: ASHEVILLE NC 28805

Title SECRETARY  
Name DONAHUE, ELLEVEVE  
Address ONE VANCE GAP ROAD  
City-State-Zip: ASHEVILLE NC 28805

Title ASSISTANT SECRETARY  
Name WRAY, KEVIN  
Address ONE VANCE GAP ROAD  
City-State-Zip: ASHEVILLE NC 28805

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ELLEVEVE DONAHUE**SECRETARY, BY JULIE  
PHILLIPS, ATTORNEY-IN-  
FACT****04/20/2022**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date