

815208

Annual Report

800002537558--7

Filed 4-2-85

2 pgs.

**DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR**

|                                                               |                                                                                   |                                                                                                   |                                  |
|---------------------------------------------------------------|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|----------------------------------|
| <b>CORPORATION</b><br><br><b>ANNUAL REPORT</b><br><b>1985</b> |  | FLORIDA DEPARTMENT OF STATE<br>George F. Browne<br>Secretary of State<br>DIVISION OF CORPORATIONS | FILED<br><br>APR 11 11 45 AM '85 |
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Read Notice and Instructions on Other Side Before Making Entries  
**Filing Fee of \$20 Required — Make Checks Payable To: Secretary of State**

|                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                        |
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| <b>1. Name and Address of Corporation Principal Office</b><br><br><div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;">         815208 4<br/> <b>MARRIOTT CORPORATION</b><br/> <b>MARRIOTT DRIVE</b><br/> <b>WASHINGTON, D C</b><br/> <div style="text-align: right;">20058</div> </div> | <b>2. Enter Change of Address of Corporation Principal Office</b><br>Office P.O. Box Number Alone is NOT Sufficient<br><br>Street Address<br>P.O. Box No.<br>City<br>State<br>Zip Code |
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If above address is incorrect in any way enter the correct address in block 2. Include Zip Code.  
 1. Incorporated or Qualified Business in Florida: **04/14/1961**  
 4. Federal Employer Identification Number: **53-0085950**  
 5. Date of Last Report: **04/18/1984**

| Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State |
|---------------------------------|-------|----------------------------------------------------------------------------------|----------------|
| EVANS, SHIRLEY J                | A/S   | MARRIOTT DRIVE                                                                   | WASHINGTON, DC |
| SCHULTZ, ROBERT J               | E/V/P | MARRIOTT DRIVE                                                                   | WASHINGTON, DC |
| Gary L. Wilson                  | P/E/O | MARRIOTT DRIVE                                                                   | WASHINGTON, DC |
| MARRIOTT, J W JR                | E/V/P | MARRIOTT DRIVE                                                                   | WASHINGTON, DC |
| MALEK, FREDERIC V               | C/O/B | MARRIOTT DRIVE                                                                   | WASHINGTON, DC |
| MARRIOTT, WILLARD J SR          | G/V/C | MARRIOTT DRIVE                                                                   | WASHINGTON, DC |
| MARRIOTT, RICHARD E             |       |                                                                                  |                |

**Registered Agent Information**

|                                                                                                                                                                   |                                                                                                                                       |
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| <b>7. Name and Address of Current Registered Agent</b><br><br>PRENTICE HALL CORPORATION SYSTEM, INC.<br>SUITE 420 LEWIS STATE BANK BLDG.<br>TALLAHASSEE, FL 32301 | <b>8. Name and Address of New Registered Agent</b><br>Name<br>Street Address (Do NOT Use P.O. Box Number)<br>City, State and Zip Code |
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9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.  
 Such change was authorized by resolution duly adopted by its board of directors on \_\_\_\_\_  
 I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
 (Registered Agent Accepting Appointment) **\$3.00 additional fee required for Registered Agent changes.**

|                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                               |
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| <b>10. IMPORTANT — THIS SECTION MUST BE COMPLETED</b><br>Has this corporation amended its articles to reflect an increase in the authorized number of shares since the last annual report?<br>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | <b>11. IMPORTANT — THIS SECTION MUST BE COMPLETED</b><br>Has said amendment been filed with this office?<br>If the answer is no, this report cannot be processed.<br>YES <input type="checkbox"/> NO <input type="checkbox"/> |
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12. I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.  
 I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. (Officer signing must be listed in Block 6)

|                                                                                                            |                                   |                                                              |
|------------------------------------------------------------------------------------------------------------|-----------------------------------|--------------------------------------------------------------|
| Signature: <i>Christopher G. Townsend</i><br>Typed Name of Signing Officer: <b>Christopher G. Townsend</b> | Title: <b>Assistant Secretary</b> | Date: <b>3/1/85</b><br>Telephone Number: <b>301 897-7508</b> |
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13. Should you desire a certificate? ☐ Yes ☐ No  
**\$5 additional fee required for a Certificate of Status**

CFC036 (1/85)