

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 824501

FILED  
Jul 05, 2007  
Secretary of State

Entity Name: THE COLONY HOTEL INC.

**Current Principal Place of Business:**

155 HAMMON AVE.  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2375  
PALM BEACH, FL 33480

**New Mailing Address:**

FEI Number: 59-1292341

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WETENHALL, ROBERT C PD  
Address: 375 PARK AVE  
City-St-Zip: NEW YORK, NY

Title: CD ( ) Delete  
Name: CLARK, HAYES CD  
Address: 150 GOMEZ ROAD  
City-St-Zip: HOBE SOUND, FL

Title: DST ( ) Delete  
Name: CLARK, ROSAMOND  
Address: 150 GOMEZ RD  
City-St-Zip: HOBE SOUND, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT WETENHALL

PD

07/05/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date