

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 831650 (7)

1. Corporation Name
HYATT CORPORATION

Principal Place of Business 200 WEST MADISON ST. 41ST FLOOR CHICAGO IL 60606	Mailing Address 200 WEST MADISON ST. 41ST FLOOR CHICAGO IL 60606
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/16/1974	
21 Suite, Apt. #, etc	22 City & State	23 Zip	24 Country	25	26
21		26		4. FEI Number 94-1649123	
22		27		Applied For Not Applicable	
23		28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24		29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent UNITED STATES CORPORATION COMPANY 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	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 file if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	V	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BORG, FRANK		1.2 NAME		
STREET ADDRESS	200 WEST MADISON		1.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60606		1.4 CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PRITZKER, THOMAS J.		2.2 NAME		
STREET ADDRESS	200 WEST MADISON		2.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60606		2.4 CITY-ST-ZIP		
TITLE	VS	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HANDELSMAN, HAROLD S.		3.2 NAME		
STREET ADDRESS	200 WEST MADISON		3.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60606		3.4 CITY-ST-ZIP		
TITLE	VT	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	POSNER, KENNETH R.		4.2 NAME		
STREET ADDRESS	200 WEST MADISON		4.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60606		4.4 CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PRITZKER, NICHOLAS J.		5.2 NAME		
STREET ADDRESS	200 WEST MADISON		5.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60606		5.4 CITY-ST-ZIP		
TITLE	CD	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PRITZKER, JAY A.		6.2 NAME		
STREET ADDRESS	200 WEST MADISON		6.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60606		6.4 CITY-ST-ZIP		

14. 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 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: *Kenneth R. Posner* Kenneth R. Posner 1/6/98 312-750-1234

CR2E034 (10/97)