

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

1 of 2
0003426 MB

DOCUMENT # **A28165**

1. Entity Name
OUTRIGGER LODGING SERVICES LIMITED PARTNERSHIP



FILED

2003 AUG 19 AM 8:26

DEPARTMENT OF CORPORATIONS
TALLAHASSEE, FLORIDA



Principal Place of Business
**1600 VENTURA BLVD.
SUITE 1010
ENCINO CA 91436**

Mailing Address
**P.O. BOX 88298
HONOLULU HA 96830-8298**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
City & State

Zip Country
Zip Country

DUE BY SEPTEMBER 24, 2003

4. FEI Number **95-4181890**
Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$0.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	F95000002431
NAME	OUTRIGGER LODGING MANAGEMENT, INC.
STREET ADDRESS	2375 KUHIO AVE.
CITY-ST-ZIP	HONOLULU HI 96815
DOCUMENT #	F93000001254
NAME	FITTS LODGING SERVICES
STREET ADDRESS	229 SOUTH STATE STREET
CITY-ST-ZIP	DOVER DE
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	300022406193
CITY-ST-ZIP	08219/03-01019-001 **141.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: **SIGNATURE REQUIRED ON FITTS**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date **Aug 12/03** Daytime Phone # **(878) 905-8280**

CR2E003 (4/03)



2da

M A N A G E M E N T M A R K E T I N G D E S I G N

2003 AUG 19 AM 8:27

DEPARTMENT OF CORPORATIONS
TALLAHASSEE, FLORIDA

August 13, 2003

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314-6327

Re: 2003 Florida Renewal Form for
Outrigger Lodging Services Limited Partnership (Document #A28165)

To Whom It May Concern,

Enclosed please find Check #23053 in the amount of \$141.25 for payment of the 2003 Outrigger Lodging Services Limited Partnership Uniform Business Report (UBR).

Please note that our office did not receive the first notice mailed in January 2003 and now ask that the late fee of \$400.00 be waived.

You may contact me at (818) 905-8280 should you have questions regarding this matter.

Thank you for your kind consideration,

Martti Mannoja
Sr. Vice President Corporate Controller

MM:jt