

DOCUMENT # A96000002055

1. Entity Name

G.B. HOTEL PARTNERS, LTD.

Principal Place of Business

3250 MARY STREET, FIFTH FLOOR
MIAMI FL 33133

Mailing Address

3250 MARY STREET, FIFTH FLOOR
MIAMI FL 33133-5232FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY 25 PM 1:33



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 65-0726544

Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$2,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date.11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATIONA 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 # P96000089474
NAME KEY RESORT, INC.
STREET ADDRESS 3250 MARY STREET, FIFTH FLOOR
CITY - ST - ZIP MIAMI FL 33133DOCUMENT # F97000003675
NAME GB (KEY BISCAYNE) OPERATING CORPORATION
STREET ADDRESS 10777 WESTHEIMER, SUITE 1000
CITY - ST - ZIP HOUSTON TX 77042DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIPDOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIPDOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIPDOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

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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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PARTNER

DOUGLAS J. WEISER,
PRESIDENT, WIL
KEY CORP, GEN. PTR.

APR. 27, 2000

Date

Daytime Phone #

305-
445-4200