

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2002 8:00 am
Secretary of State

04-08-2002 90216 044 ***150.00

0618672 AT

DOCUMENT # F00000002153

1. Entity Name

WESTIN NORTH AMERICA MANAGEMENT CO.

Principal Place of Business

**777 WESTCHESTER AVENUE
 WHITE PLAINS NY 10604**

Mailing Address

**777 WESTCHESTER AVENUE
 WHITE PLAINS NY 10604**

2. Principal Place of Business

Suite, Apt. #, etc.
1111 Westchester Ave.

City & State

3. Mailing Address

2231 E Camelback Rd.

Suite, Apt. #, etc.

Ste 400

City & State

Phoenix, AZ

Zip

Country

Zip

Country

85016

USA

4. FEI Number

91-1877017

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete
PD DARNALL, THEODORE W
 STREET ADDRESS **777 WESTCHESTER AVENUE**
 CITY-ST-ZIP **WHITE PLAINS NY 10604**

TITLE NAME ☐ Delete
VTD BROWN, RONALD C
 STREET ADDRESS **777 WESTCHESTER AVENUE**
 CITY-ST-ZIP **WHITE PLAINS NY 10604**

TITLE NAME ☒ Delete
VAS LATHAM, JAMES D
 STREET ADDRESS **777 WESTCHESTER AVENUE**
 CITY-ST-ZIP **WHITE PLAINS NY 10604**

TITLE NAME ☐ Delete
VAT MORROW, PETER
 STREET ADDRESS **2231 E. CAMELBACK ROAD, SUITE 400**
 CITY-ST-ZIP **PHOENIX AZ 85016**

TITLE NAME ☐ Delete
VAT SCHNAID, ALAN M
 STREET ADDRESS **2231 E. CAMELBACK ROAD, SUITE 400**
 CITY-ST-ZIP **PHOENIX AZ 85016**

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☒ Change ☐ Addition
 STREET ADDRESS **1111 Westchester Ave.**
 CITY-ST-ZIP

TITLE NAME ☒ Change ☐ Addition
VATD
 STREET ADDRESS **2231 E. Camelback Rd #400**
 CITY-ST-ZIP **Phoenix, AZ 85016**

TITLE NAME ☒ Change ☒ Addition
VAS
 STREET ADDRESS **Dina F. Diagonale**
 CITY-ST-ZIP **1111 Westchester Ave. White Plains, NY 10604**

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Peter Morrow

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-26-02

Date

(602) 852-3900

Daytime Phone #

CR2E034 (9/01)