



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

DOCUMENT # F01000002169 1. Entity Name HT-ARUBA, INC.					
Principal Place of Business 200 W. MADISON 41ST FLOOR CHICAGO, IL 60606 US				Mailing Address 200 W. MADISON 41ST FLOOR CHICAGO, IL 60606 US	
2. Principal Place of Business 71 S. Wacker Drive		3. Mailing Address 71 S. Wacker Drive		 04152005 Chg-P CR2E034 (10/03)	
Suite, Apt. #, etc. 12th Floor		Suite, Apt. #, etc. 12th Floor			
City & State Chicago, IL		City & State Chicago, IL			
Zip 60606		Zip 60606			
Country USA		Country USA		4. FEI Number 36-3456158	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				7. Name and Address of New Registered Agent Name N/A 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.					
900051637139					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees Trust Fund Contribution.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GEOGA, DOUGLAS 200 W. MADISON CHICAGO, IL 60606	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Geoga, Douglas 71 South Wacker Drive Chicago, IL 60606	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD HANDELSMAN, HAROLD S 200 W. MADISON CHICAGO, IL 60606	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President, Sec. Handelsman, Harold S. 71 South Wacker Drive Chicago, IL 60606	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD ROSE, KIRK A 200 W. MADISON CHICAGO, IL 60606	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President, Treas. Rose, Kirk A. 71 South Wacker Drive Chicago, IL 60606	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MAKI, CHRISTINE 200 W. MADISON CHICAGO, IL 60606	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President, Tax Maki, Christine 71 South Wacker Drive Chicago, IL 60606	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President Enayetullah, Habib 71 South Wacker Drive Chicago, IL 60606	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: By <u>Kirk A. Rose</u> <u>4/21/05</u> Date <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Kirk A. Rose, VP & Treasurer					



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 329093 4322610

AUTHORIZATION :

COST LIMIT : \$ 150.00

Patricia Pizante

ORDER DATE : April 21, 2005

ORDER TIME : 10:07 AM

ORDER NO. : 329093-015

CUSTOMER NO: 4322610

CUSTOMER: Laura Geis
Hyatt Hotels Corporation
14th Floor
71 S. Wacker Drive
Chicago, IL 60606

ANNUAL REPORT FILING

NAME: HT-ARUBA, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext. 2956

EXAMINER'S INITIALS: _____

RECEIVED
05 APR 22 4:11:03
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D.C.