

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006304

FILED
Jan 12, 2004
Secretary of State

Entity Name: CORNERSTONE HOSPITALITY GROUP, INC.

Current Principal Place of Business:

1401 BANK OF AMERICA CENTER
100 S. CHARLES STREET
BALTIMORE, MD 21201

New Principal Place of Business:

Current Mailing Address:

1401 BANK OF AMERICA CENTER
100 S. CHARLES STREET
BALTIMORE, MD 21201

New Mailing Address:

FEI Number: 56-1770184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TAYLOR, CHARLES
Address: 245 TOWNPARK DR., STE 500
City-St-Zip: KENNESAW, GA 30144

Title: S () Delete
Name: CANNON, DEBORAH L
Address: 245 TOWNPARK DR., STE 500
City-St-Zip: KENNESAW, GA 30144

Title: AS () Delete
Name: SCHELICH, THOMAS J
Address: 100 S. CHARLES STREET, STE 1401
City-St-Zip: BALTIMORE, MD 21201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS J. SCHELICH

AS

01/12/2004

Electronic Signature of Signing Officer or Director

Date