

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90056 023 ***150.00

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1. Entity Name
DELAWARE HOTWIRE, INC.



Principal Place of Business
333 MARKET STREET, SUITE 100
SAN FRANCISCO, CA 94105

Mailing Address
333 MARKET STREET, SUITE 100
SAN FRANCISCO, CA 94105

50012865



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01282005

Chg-P

CR2E034 (10/03)

4. FEI Number
74-2938016

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVE.
TALLAHASSEE, FL 32301

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete
NAME PETERSON, KARL
STREET ADDRESS 333 MARKET STREET, SUITE 100
CITY-ST-ZIP SAN FRANCISCO, CA 94105

TITLE CEO ☐ Change ☒ Addition
NAME BOB HOHMAN
STREET ADDRESS 333 MARKET ST., SUITE 100
CITY-ST-ZIP SAN FRANCISCO, CA 94105

TITLE CFO ☒ Delete
NAME DUNN, TIMOTHY
STREET ADDRESS 333 MARKET STREET, SUITE 100
CITY-ST-ZIP SAN FRANCISCO, CA 94105

TITLE CFO ☐ Change ☒ Addition
NAME ERIC GROSSE
STREET ADDRESS 333 MARKET ST., SUITE 100
CITY-ST-ZIP SAN FRANCISCO, CA 94105

TITLE CPO ☒ Delete
NAME GREGG, BROCKWAY
STREET ADDRESS 333 MARKET STREET, SUITE 100
CITY-ST-ZIP SAN FRANCISCO, CA 94105

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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TITLE ☐ Delete
NAME
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CITY-ST-ZIP

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-05

Date

1-415-343-8400

Daytime Phone #