FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

96 APR 29 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F93000003507 (1)**

1. Corporation Name

BRYANSTON B.P., INC.

Principal Place of Business	Mailing Address
C/O TOLLMAN HUNDLEY HOTELS 100 SUMMIT LAKE DRIVE, 3RD FLOOR NORTH VALHALLA NY 10536	C/O TOLLMAN HUNDLEY HOTELS 100 SUMMIT LAKE DRIVE, 3RD FLOOR NORTH VALHALLA NY 10536

3. Date Incorporated or Qualified: **08/02/1993**
3a. Date of Last Report: **12/06/1995**

2. Principal Place of Business	2a. Mailing Address
21 c/o Tollman Hundley Hotels	26 c/o Tollman Hundley Hotels
Suite, Apt. #, etc. 22 1886 Route 52	Suite, Apt. #, etc. 27 1886 Route 52
City & State 23 Hopewell Junction N.Y.	City & State 28 Hopewell Junction N.Y.
Zip / Country 24 12533 / 25 US	Zip / Country 29 12533 / 30 US

4. FEI Number: **13-3727012** ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET

TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 200001798992
-04/29/96--01067--012
****200.00 ****200.00

84 City **FL** 86 Zip

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Marcia A. Hamer — Marcia A. Hamer, Assistant Secretary — 4/26/96
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent's signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	☐ DELETE	11 TITLE		☒ Change ☐ Addition
NAME	TOLLMAN, STANLEY S		12 NAME		
STREET ADDRESS	100 SUMMIT LAKE DRIVE, 3RD FLOOR NORTH		13 STREET ADDRESS	1886 Route 52	
CITY-ST-ZIP	VALHALLA NY 10536		14 CITY-ST-ZIP	Hopewell Junction N.Y. 12533	
TITLE	PD	☐ DELETE	21 TITLE		☒ Change ☐ Addition
NAME	HUNDLEY, MONTY D		22 NAME		
STREET ADDRESS	100 SUMMIT LAKE DRIVE, 3RD FLOOR NORTH		23 STREET ADDRESS	1886 Route 52	
CITY-ST-ZIP	VALHALLA NY 10536		24 CITY-ST-ZIP	Hopewell Junction N.Y. 12533	
TITLE	VSD	☐ DELETE	31 TITLE		☒ Change ☐ Addition
NAME	FREEDMAN, SANFORD		32 NAME		
STREET ADDRESS	100 SUMMIT LAKE DRIVE, 3RD FLOOR NORTH		33 STREET ADDRESS	1886 Route 52	
CITY-ST-ZIP	VALHALLA NY 10536		34 CITY-ST-ZIP	Hopewell Junction N.Y. 12533	
TITLE	T	☐ DELETE	41 TITLE		☒ Change ☐ Addition
NAME	CUTLER, JAMES A		42 NAME		
STREET ADDRESS	100 SUMMIT LAKE DRIVE, 3RD FLOOR NORTH		43 STREET ADDRESS	1886 Route 52	
CITY-ST-ZIP	VALHALLA NY 10536		44 CITY-ST-ZIP	Hopewell Junction N.Y. 12533	
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Stanley Lee Tollman, Secy. — 4/23/96 — 914-223-3603
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #