## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

.PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9400000515 (6)

DHI RESORT CORP., A DELAWARE CORPORATION Principal Place of Business Mailing Address 25 CENTRAL WAY 25 CENTRAL WAY Suite 400 SUITE 400 KIRKLAND WA 98033 DO NOT WRITE IN THIS SPACE KIRKLAND WA 98033 3. Date Incorporated or Qualified 02/02/1994 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 65-0487689 Not Applicable 26 Suite. Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CORPORATION SERVICE COMPANY 1201 HAYS ST 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 вэ Zip Code 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 Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change DELETE Addition 1.1 TITLE TITLE COLEE, PATRICK R NAME 1.2 NAME CR2E034 25 CENTRAL WAY., STE 400 STREET ADDRESS 1.3 STREET ADDRESS KIRKLAND WA 98033 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE PHILBRICK, GARY NAME 22 NAME 180 1ST WEST ST., STE 216 STREET ADORESS 2.3 STREET ADDRESS KETCHUM ID 83340 CITY-ST-79P 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE BROWN, PHILIP A NAME 3.2 NAME 25 CENTRAL WAY., STE 400 3.3 STREET ADDRESS STREET ADDRESS KIRKLAND WA 98033 CITY-ST-ZIP 3 4. CITY - ST - ZIP J. Benecke Change Pladdition DELETE 4.1 TITLE TITLE MICHAEL NAME 4. 2 NAME Central Way Ste 400 STREET ADDRESS 43 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE Addition 5.1 TITLE 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

DELETE

61 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

14. I heroby certify that the information suppli indicated on this annual report or supplie officer or director of the compration of the Block 12 or Block 13 if charged, or or ar

TITLE

NAME

STREET ADDRESS

Patrick R. Colee

4/10/98

or the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

FILED

Apr 21 1998 8:00am

Secretary of State

425-827-8737

Change

Addition