

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90256 001 ***150.00

0591286

DOCUMENT # F94000006457

1. Entity Name
RFS INNS, INC.

Principal Place of Business
889 RIDGE LAKE BLVD
STE 100
MEMPHIS TN 38120
US

Mailing Address
9336 CIVIC CENTER DR.
BEVERLY HILLS CA 90210

2. Principal Place of Business
9336 CIVIC CENTER DR
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
BEVERLY HILLS CA
 Zip
90210
 Country
USA

City & State
 Zip
 Country

4. FEI Number **62-1071048**
 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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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.

SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HART, MATTHEW J		NAME		
STREET ADDRESS	755 CROSSOVER LANE		STREET ADDRESS		
CITY-ST-ZIP	MEMPHIS TN 38117		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUCKESTEIN, DIETER H		NAME		
STREET ADDRESS	755 CROSSOVER LANE		STREET ADDRESS		
CITY-ST-ZIP	MEMPHIS TN 38117		CITY-ST-ZIP		
TITLE	ST	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSSELL, LAWRENCE J		NAME		
STREET ADDRESS	8856 ASPEN VIEW COVE		STREET ADDRESS		
CITY-ST-ZIP	CORDOVA TN		CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHULTZ, FREDERICK G		NAME		
STREET ADDRESS	755 CROSSOVER LANE		STREET ADDRESS		
CITY-ST-ZIP	MEMPHIS TN 38117		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	VP+SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	M. HUESMITH III	
STREET ADDRESS			STREET ADDRESS	9336 CIVIC CENTER DR	
CITY-ST-ZIP			CITY-ST-ZIP	BEVERLY HILLS CA 90210	
TITLE		<input type="checkbox"/> Delete	TITLE	VP+ASST. TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	W. STEVEN STANDEER	
STREET ADDRESS			STREET ADDRESS	9336 CIVIC CENTER DR	
CITY-ST-ZIP			CITY-ST-ZIP	BEVERLY HILLS CA 90210	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: M. Huesmith III **M. Hues Smith III** **4-25-01** **310-278-4321**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)