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FILED

May 16 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000000079 (2)

1. Corporation Name

HOTEL INVESTORS OF NEBRASKA, INC.

Principal Place of Business

11835 W OLYMPIC BLVD
STE 675
LA CA 90064
US

Mailing Address

11835 W OLYMPIC BLVD
STE 675
LA CA 90064-5001
US

3. Date Incorporated or Qualified

01/05/1995

3a. Date of Last Report

04/19/1996

4. FEI Number

52-1278453

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☒ No

2. Principal Place of Business

21 2231 E. CAMILBARK RD

Suite, Apt. #, etc.

22 STE 400

City & State

23 PHOENIX AZ

Zip

24 85016

Country

25 USA

2a. Mailing Address

26 2231 E CAMILBARK RD

Suite, Apt. #, etc.

27 STE 400

City & State

28 PHOENIX AZ

Zip

29 85016

Country

30 USA

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME MALLORY, KEVIN E

STREET ADDRESS 11835 W OLYMPIC BLVD STE 675

CITY - ST - ZIP LOS ANGELES CA

TITLE TS ☒ DELETE

NAME MALPASUTO, ROBERT

STREET ADDRESS 11845 W. OLYMPIC BLVD., #580

CITY - ST - ZIP LOS ANGELES CA 90064

TITLE S ☒ DELETE

NAME AZEVEDO, HELEN D

STREET ADDRESS 11835 W OLYMPIC BLVD STE 675

CITY - ST - ZIP LOS ANGELES CA

TITLE ST ☒ DELETE

NAME MCCAIN, CHARLES E

STREET ADDRESS 11835 W OLYMPIC BLVD STE 675

CITY - ST - ZIP LOS ANGELES CA

TITLE D ☒ DELETE

NAME LAPIN, JEFFREY C

STREET ADDRESS 11835 W OLYMPIC BLVD STE 675

CITY - ST - ZIP LOS ANGELES CA

TITLE D ☒ DELETE

NAME FORD, BRUCE M

STREET ADDRESS 104 E. PARK DR., #300

CITY - ST - ZIP BRENTWOOD TN 37027

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☒ Addition

1.2 NAME ERIC A. PARZIGER

1.3 STREET ADDRESS 2231 E. CAMILBARK RD, # 400

1.4 CITY - ST - ZIP PHOENIX, AZ 85016

2.1 TITLE PD ☐ Change ☒ Addition

2.2 NAME THEODORE W. PARNALL

2.3 STREET ADDRESS 2231 E CAMILBARK RD, # 400

2.4 CITY - ST - ZIP PHOENIX, AZ 85016

3.1 TITLE SID ☐ Change ☒ Addition

3.2 NAME MIR E. MARGALIT

3.3 STREET ADDRESS 2231 E. CAMILBARK RD, # 400

3.4 CITY - ST - ZIP PHOENIX, AZ 85016

4.1 TITLE T ☐ Change ☒ Addition

4.2 NAME CHARLES E. MCCAIN

4.3 STREET ADDRESS 2231 E. CAMILBARK RD, # 400

4.4 CITY - ST - ZIP PHOENIX, AZ 85016

5.1 TITLE V ☐ Change ☒ Addition

5.2 NAME ALAN SCHNAID

5.3 STREET ADDRESS 2231 E CAMILBARK RD, # 400

5.4 CITY - ST - ZIP PHOENIX AZ 85016

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-97

602/872-3900

Date Daytime Phone #

CR2E034 (9/96)