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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

# Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90134 032 \*\*\*150.00

## DOCUMENT # F95000000079

1. Corporation Name

HOTEL INVESTORS OF NEBRASKA, INC.

Principal Place	e of Business	Mailing Address						
2231 E CAMELE	BARK RD	2231 É CAMELBACK RD						
400	•	400				DO NOT WRITE IN THIS SPACE		
PHOENIX AZ 85	i016	PHOENIX AZ 85016 US				3. Date Incorporated or Qualifed		
US		03						
		30 Maille - Add				01/05/1995 4. FEI Number		Apr lied For
<b>├</b>	lace of Business	2a. Mailing Address					Not Applicable	
	WESTCHESTER AVE	Suite Ant # atc				52-1278453   Not Applicable   \$8.75 Additional		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required			
22		City & State						
City & Stat	. 1	<del> </del>				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
	FE PLAINS NY	Zip Country						
Zip	Country	<del>_</del> ' '			8. This corporation owes the current year intangible  Person al Property Tax.   Yes XNo			
24 1060		29 Basistared Asset	30			10. Name and Address of New Registered		
	9. Name and Address of Current	Registered Agent		31 N	ame	To. Name and Address of New Registers	· · · · · · · · · · · · · · · · · · ·	
CT C	CORPORATION SYSTEM			"				
	S. PINE ISLAND RD.		[4	32 S	treet Ac d	cdress (P.O. Box Number is Not Acceptable)		
	NTATION FL 33324		ļ.,	33				
PLAI	TIMILON PL 33324		Ι'	53				
[			ļī	34 C	ity		85 Zi	p C ode
						<u></u>		
11. Pursuant to the provisions of Sc ctions 607,0502 and 607,1508, Florida Statutes, the above-named exporation 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, am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.								
SIGNATURE								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT		gent sign	nature requir	red when reinstating) DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD	☑ DELETE	1,1 TITL	1		FRED KLEISNER-P	Chang	ge 🔀 Addition
NAME	DANZIGER, ERIC A		1.2 NAM	ŀΕ		777 WESTCHESTER AVENUE		
STREET ADDRESS	2231 E CAMELBACK RD, 400		1.3 STR	EET ADD	RESS			ļ
CITY-ST-ZIP	PHONIX AZ		14 CITY	'-ST-ZIP	,	WHITE PLAINS, NY 10604		
TITLE	VD	□ DELETE	2 1 TITL	Ę			☐ Chang	ge 🖾 Addition
NAME	DARNALL, THEODORE W		22 NAM	ŧΕ	Ì	MARK ROZELLS-V/T		
STREET ADDRE 3S	2231 E CAMELBACK RD, 400		23 STR	EET ADD	RESS	2231 E CAMELBACK RD, STE 400		
CITY-ST-ZIP	PHOENIX AZ		2, 4 CIT	Y-ST-Z#	ρ	~PHOENIX, AZ_85016	**	
TITLE	SD	Ø DELETE	3.1 TITL	E		JAMES LATHAM-V/S	Chang	je 🔀 Addition
NAME	MARGALIT, NIR E		3 2 NAM	Œ				
STREET ADDRESS	2231 E CAMELBACK RD, 400		3.3 STR	EET ADD	DRESS	777 WESTCHESTER AVENUE		
CITY-ST-ZIP	PHOENIX AZ		3.4. CFT	Y-\$T-Z!	P _	WHITE PLAINS, NY 10604		
TITLE	T	Ø DELETE	4,1 TIT\	E			Chang	ge 🔀 Addition
NAME	MCCAIN, CHARLES E		4. 2 NA	ΜE		PETER MORROW-AT		
STREET ADDRESS	2231 E CAMELBACK RD, 400			EET ADD	DRESS	2231 E CAMELBACK RD, STE 400		
į	PHOENIX AZ			r-ST-ZIF		•		
TITLE	V	Ø DELETE	5.1 TITL			PHOENIX, AZ 85016	Chang	ge 🔀 Addition
NAME	SCHNAID, ALAN		5.2 NAM			DAVID HUGHES-AT		
STREET ADDRESS	2231 E CAMELBACK RD, 400		. I	EET ADD	DRESS	2231 E CAMELBACK RD, STE 400		
				'-ST-ZIF	1	PHOENIX, AZ 85016		
CITY-ST-ZIP	PHOENIX AZ	∑ DELETE	6.1 TITL				Chang	je 🔀 Addition
TITLE		<u></u>	6.2 NAM			DETED ALDEOT-AT		_
NAME STREET ADDRESS				EET ADD	RESS	PETER ALPERT-AT		
L STREET AUDIES	1		4.4 4.11			A A AMES O MESTER AMENDIE		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 coath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as recuired 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, with all other like empowered. CITY-ST-ZIP

SIGNATURE:

IND TYPED OR PRINTED NAME OF SIGNING OFFICE POR DIRECTOR

4-20-99