

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Jun 26 1997 8:00am
Secretary of State

DOCUMENT # F95000002155 (8)
1. Corporation Name

BAC HOTEL MANAGEMENT, INC.



Principal Place of Business

4243 DUNWOODY CLUB DR.
SUITE 200
ATLANTA GA 30350-5206

Mailing Address

4243 DUNWOODY CLUB DR.
SUITE 200
ATLANTA GA 30350-5206

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

05/02/1995

3a. Date of Last Report

04/17/1996

4. FEI Number

58-2023734

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

10. Name and Address of New Registered Agent

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 PTD ☐ DELETE

NAME COLLINS, DOUGLAS C
STREET ADDRESS 4243 DUNWOODY CLUB, DR., SUITE 200
CITY-ST-ZIP ATLANTA GA

TITLE VS ☐ DELETE

NAME LEE, ROBERT B
STREET ADDRESS 4242 DUNWOODY CLUB DRIVE., SUITE 200
CITY-ST-ZIP ATLANTA GA

TITLE C ☐ DELETE

NAME MILLER, ROBERT M
STREET ADDRESS 525 E 80TH STREET, APT. 8B
CITY-ST-ZIP NEW YORK NY

TITLE D ☐ DELETE

NAME STERN, WILLIAM
STREET ADDRESS 200 E. 57TH ST.
CITY-ST-ZIP NEW YORK NY 10022

TITLE D ☐ DELETE

NAME LEON M WAGNER
STREET ADDRESS 1325 AVE OF THE AMERICAS, 22ND FLOOR
CITY-ST-ZIP NEW YORK N

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP ATLANTA, GA 30350

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP ATLANTA, GA 30350

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP NEW YORK, NY 10021

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP 200 E. 57TH ST., SUITE 10F

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP 425 LEXINGTON AVE., 5TH FLOOR
NEW YORK, NY 10017

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:

Robert B. Lee

ROBERT B. LEE
SECRETARY

6/23/97

770-393-2662

CR2E034 (9/96)