2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State
02-28-2002 90023 019 ***150.00

DOCUMENT # F95000002431

1. Entity Name
OUTRIGGER LODGING MANAGEMENT, INC.

Principal Place of Business	Mailing Address
P.O. BOX 88298 HONOLULU HI 96830-8298	P.O. BOX 88298 HONOLULU HI 96830-8298

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 88-0245125 ☐ 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
C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2002 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CAREY III, W D 3701-C DIAMOND HEAD ROAD HONOLULU HI	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VT WILINSKY, MELVYN M 698 PUUIKENA DRIVE HONOLULU HI	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WILLIAMS, REBECCA S 71 S. KALAHEO AVE. KAILUA HI	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ☒ Change ☐ Addition MELVIN Y. KANESHIGE 4614 Aukai Place Honolulu, HI 96816
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD KELLEY, RICHARD R 3707-B DIAMOND HEAD ROAD HONOLULU HI	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT AOKI, AVERY K 322 KEALAHOU STREET HONOLULU HI	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS KELLEY, ELIZABETH A 3725 DIAMOND HEAD RD HONOLULU HI 96816	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/01)

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: SIGNATURE REQUIRED MELVYN M. WILINSKY, VP 02/14/02 (808) 921-6510
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachments # F95000002431/1004532

TO: Division of Corporations
Uniform Business Report Filings
P O Box 1500
Tallahassee, FL 32302-1500

FROM: Outrigger Hotels Hawaii
Tax Services
P.O. Box 88298
Honolulu, Hawaii 96830-8298

CERTIFIED MAIL RETURN RECEIPT REQUESTED

Date: February 14, 2002

We submit the following for filing:

2002 UNIFORM BUSINESS REPORT (UBR)
Doc # F95000002431

Name	Period	Amount Enclosed
OUTRIGGER LODGING MANAGEMENT, INC	**2002 –**	**$150.00 – Check #5072**

Should you have any questions, please contact my office at (808) 921-6501.

/vt
Enclosures – 2 (check, 2002 Uniform Business Report)

RETURN RECEIPT REQUESTED :
Outrigger Hotels Hawaii
Tax Services
P O Box 88298
Honolulu, Hawaii 96830-8298

Attn: Lois Nishijima