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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 17500 Corporation Name F9500002719
Arizona Doubletree Corporation

FILED Jun 18 1997 8:00am Secretary of State

Principal Place of Business Mailing Address										
410 N. 44th St., #700 410 N. 44th S					00					
Phoenix, AZ 85008 Phoenix, AZ 8										
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						3. Date Incorporated or Qualified	3a. Date o	Last	report	
2. Principal Place of Business 2a. Mailing Address						June 6, 1995 4. FEL Number	<u> </u>	T (.		4
21	The of Basilless	26				86-0762415		-	oplied For	4
Suite, Apt.	#. etc	Suite. Apt. #, etc.				CR 75 Additional				4
22		27				5. Certificate of Status Desired			ednited	
City & Stat	te	City & State				6. Election Campaign Financing			May Be	┨
23		28				Trust Fund Contribution			may be to Fees	
Ζiρ	Country Zip			intry		8. This corporation has liability for in				7
24	25	29	30			Florida Statutes Yes No				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
CT Corporation System					Name					
1200 South Pine ISland Road					82 Street Address (P.O. Box Number is Not Acceptable)					4
Plantation, D FL 33324				52 Street Aboress (P.O. Box Number is Not Acceptable)						
1 Tancac	1011, 0 12 00024			83						٦
				84	City			.T =:-	01-	↲
				04	City		FL 85	Zip	Code	1
11. Pursuant	to the provisions of Sections 607.0502	and 607 1508, Florida State	ites, the al	pove	-named cor	poration submits this statement for the pu	rpose of cha	nging il	ts registered	1
office or r	registered agent, or both, in the State o am familiar with, and accept the obligat	t Florida. Such change was ions of, Section 607,0505. F	authorizei Iorida Stat	d by lutes	the corpora	poration submits this statement for the pu ation's board of directors. I hereby accept	the appointr	nent as	registered	
SIGNATURE		•	onou ora		•					1
SIGNATURE	Signature, typed or printed name of registered agent	and tile if applicable. (NC	TE Registered	d Age	nt signature requ	ared when reinstating)	DATE	•••		
12. OFFICERS AND DIRECTORS						ADDITIONS/CHANGES TO OFFICE	RS AND DIF	ECTOF	RS IN 12	وَا
TITLE	CO-Chairman/Director □ DELETE			TLE				Change	Addition	٦٤̈́
	Richard J. Ferris	00	1.2 N/	AME						5
STREET ADDRESS	ADDRESS 410 N. 44th St., #700			1.3 STREET ADDRESS						<u> </u>
CITY - ST - ZIP	Phoenix, AZ 85008			TY+SI	- Z IP					18
TITLE	Co-Chairman/Director		2 1 11	2 1 TITLE				Change	Addition	٦٢
NAME	Peter V. Ueberroth_	• •	2 2 N	AME						
STREET ADDRESS	410 N. 44th St., #7	00	2351	STREET ADDRESS						
CITY - ST - ZIP	Phoenix, AZ 85008			2 4 City - St - ZIP						
TITLE	VP/CFO DELETE			TLE				Change	Addition	1
NAMF	William L. Perocchi			ME						
STREET ADDRESS	410 N. 44th St., #7	00	3351	REET	ADDRESS		_			
CITY-ST-ZIP	Phoenix, AZ 85008			ITY-S	1 - ZIP					
TITLE	VP/Secretary	DELETE	4 1 TII	ILE				Change	Addition	1
3MAN	David L. Stivers		4 2 N	AME	}					
STREET ADDRESS	410 N. 44th St., #7	00	4 3 ST	REET	ADDRESS					
CITY - ST - ZIP	Phoenix AZ 85008		4 4 CI	TY-ST	- ZIP		/			
TITLE	Director	DELETE	5 1 TIT	TLE			1/4	Change	Addition	1
NAME	William R. Fatt		5.2 NA	ME	İ	/		, /	/ /	
STREET ADDRESS	TREET ADDRESS 410 N. 44th St., #700		5.3 STREE		ADDRESS	<u> </u>	16 1	2/1	0/0	ት
CITY - ST - ZIP	Phoenix, AZ 85008		5.4 CI	TY - \$1	- ZIP	///	() W	//(7/-	¥
TITLE	Director	☐ DELETE	6111	LE		70000221		hange	Addition	1
NAME	Dale F. Frey		62 NA	ME		ryyyyaaa		i"		
STREET ADDRESS	410 N. 44th St., #7	00	6 3 S ⁷	REET	AODRESS	-06/18/970106) (==UU3			
CITY - ST - ZIP	Phoenix, AZ 85008		6 4 CI			***550 . 00				
14. I do herek	by certify that the information supplied	with this filing does not gue	lify for the	AYA	notion state	d in Section 119 07/3\(ii) Florida Statutes	Liturther cod	fu that	tho	1

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 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:

/Navid L. Stivers

(602)220-6778