

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2007 8:00 am**  
**Secretary of State**

05-04-2007 90081 041 \*\*\*150.00

**DOCUMENT # F95000002719**

1. Entity Name  
**ARIZONA DOUBLETREE CORPORATION**



Principal Place of Business  
**9336 CIVIC CENTER DR.  
BEVERLY HILLS, CA 90210 US**

Mailing Address  
**9336 CIVIC CENTER DR.  
BEVERLY HILLS, CA 90210 US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04092007 Chg-P CR2E034 (12/06)

4. FEI Number  
**86-0762415**

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

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **HART, MATTHEW J**  
STREET ADDRESS **9336 CIVIC CENTER DR.**  
CITY-ST-ZIP **BEVERLY HILLS, CA 90210**

TITLE **SVCF** ☐ Delete  
NAME **LAFORGIA, ROBERT M**  
STREET ADDRESS **9336 CIVIC CENTER DR.**  
CITY-ST-ZIP **BEVERLY HILLS, CA 90210**

TITLE **VDTS** ☐ Delete  
NAME **ARMSTRONG, CRAIG W**  
STREET ADDRESS **9336 CIVIC CENTER DR.**  
CITY-ST-ZIP **BEVERLY HILLS, CA 90210**

TITLE **VPS** ☐ Delete  
NAME **SMITH, M. HUE III**  
STREET ADDRESS **9336 CIVIC CENTER DR.**  
CITY-ST-ZIP **BEVERLY HILLS, CA 90210**

TITLE **SVPT** ☐ Delete  
NAME **STANDERGE, STEVEN W**  
STREET ADDRESS **9336 CIVIC CENTER DR.**  
CITY-ST-ZIP **BEVERLY HILLS, CA 90210**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME **SVPT W. STEVEN STANDEFER**  
STREET ADDRESS **9336 CIVIC CENTER DR**  
CITY-ST-ZIP **BEVERLY HILLS CA 90210**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**W. STEVEN STANDEFER 4/12/07**

Date

Daytime Phone #

**310-278-4321**