

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F95000002865 (2)

1. Corporation Name

HMH HPT COURTYARD, INC.



Principal Place of Business

10400 FERNWOOD ROAD
DEPT. 72.862
BETHESDA MD 20817

Mailing Address

10400 FERNWOOD ROAD
DEPT. 72.862
BETHESDA MD 20817

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

25 Suite, Apt. #, etc.

26 City & State

27 Zip

28 Country

9. Name and Address of Current Registered Agent

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

3. Date Incorporated or Qualified

06/13/1995

3a. Date of Last Report

4. FEI Number

52-1915184

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

81 Name

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

83

84 City

FL

85 Zip Code

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, if applicable,

(NOTE: Registered Agent's signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME BOLLENBACH, STEPHEN F
STREET ADDRESS 1555 35TH STREET, NW
CITY- ST- ZIP WASHINGTON DC 20007
☒ DELETE

TITLE VS
NAME TOWNSEND, CHRISTOPHER G
STREET ADDRESS 10 PARAMUS COURT
CITY- ST- ZIP N. POTOMAC MD 20878
☐ DELETE

TITLE AS
NAME WALLACE, SUSAN E
STREET ADDRESS 25 BUSH HILL COURT
CITY- ST- ZIP GAITHERSBURG MD 20882
☐ DELETE

TITLE T
NAME PARSONS, ROBERT E JR.
STREET ADDRESS 5 PARAMUS COURT
CITY- ST- ZIP N. POTOMAC MD 20878
☐ DELETE

TITLE D
NAME MARIOTT, RICHARD E
STREET ADDRESS 18040 PLEASANT HILL DR.
CITY- ST- ZIP POTOMAC MD 20854
☐ DELETE

TITLE D
NAME HART, MATTHEW J
STREET ADDRESS 8801 WATTS MINE TERRACE
CITY- ST- ZIP POTOMAC MD 20854
☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V/T
1.2 NAME Scott A. LaPorta
1.3 STREET ADDRESS 10400 Fernwood Road
1.4 CITY- ST- ZIP Bethesda, MD 20817-1109
☐ Change ☒ Addition

2.1 TITLE V
2.2 NAME Bruce D. Wardinski
2.3 STREET ADDRESS 10400 Fernwood Road
2.4 CITY- ST- ZIP Bethesda, MD 20817-1109
☐ Change ☒ Addition

3.1 TITLE V
3.2 NAME Christopher J. Nassetta
3.3 STREET ADDRESS 10400 Fernwood Road
3.4 CITY- ST- ZIP Bethesda, MD 20817-1109
☐ Change ☒ Addition

4.1 TITLE P/D
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
☒ Change ☐ Addition

5.1 TITLE V/D
5.2 NAME Stephen J. McKenna
5.3 STREET ADDRESS 10400 Fernwood Road
5.4 CITY- ST- ZIP Bethesda, MD 20817-1109
☐ Change ☒ Addition

6.1 TITLE AS
6.2 NAME Tracy M. J. Colden
6.3 STREET ADDRESS 10400 Fernwood Road
6.4 CITY- ST- ZIP Bethesda, MD 20817-1109
☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

Susan E. Wallace
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Susan E. Wallace

4/18/96

(301) 380-9000

Date

Daytime Phone #

CR2E034 (12/95)