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

PROFIT CORPORATION



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

DOCUMENT #

ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS F95000004056 (6) INTERSTATE HOTELS CORPORATION

FILED Apr 27 1998 8:00am



Principal Place of Business Mailing Address							- I LODYAND HAD BAND BURKI BORIN ODAN ODAN BONIN BONIN BURKI DUKKI DUKKI DARAN BAND BARAN BURK			
FOSTER PLAZA X FOSTER PLAZA 680 ANDERSEN DR. 680 ANDERSEN										
PITTSBURGH			880 ANDERSEN DR. PITTSBURGH PA 15220				DO NOT WRITE IN THIS SPACE			
(110001011111020							3. Date Incorporated or Qualified			
							08/22/1995			
2. Principal Place of Business 2a. Mailing Address							4. FEI Number		I A	oplied For
21		26	25				25-1309590		\vdash	ot Applicable
Suite, Apt	#, etc	Suite,	Suite, Apt. #, etc.					<u> </u>		Additional
22		27	27				6. Certificate of Status Desired	□ >		equired
City & Stal	to		City & State				Election Campaign Financing \$5.00 May Be			
23		28	28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Zip Cour				8. This corporation owes or has pai	d the current	year In	tangible
24	25	29		30			Personal Property Tax due June	_		□No
	9. Name and Address of Currer	nt Registered A	\gent				10. Name and Address of New Reg	istered Age	nt	
CORPORATION SERVICE COMPANY					81	Name				
1201 HAYS STREET					82	Street	Address (P.O. Box Number is Not Acceptable	<u></u>		
TALLAHASSEE FL 32301-2525					"	SHEEL	Produced (F.O. DOX NOTIDE) IS NOT MCCEPTED.	c)		ŀ
, , , , , , , , , , , , , , , , , , ,					83					
				i	84	City		FL 8	i Zip	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508	8. Florida Statute	s. the at	bove	-named	corporation submits this statement for the pu		naina i	ts registered
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 pointed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE										i
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OFFICE	ERS AND DIF	ECTO	RS IN 12
TITLE	CD		DELETE	1.1 10	TLE				Change	☐ Addition
NAME	FINE, MILTON			1.2 N/	AME					
STREET ADDRESS FOSTER PLAZA X, 680 ANDERSEN DR.				1.3 \$		ADDRESS				H
CITY - ST - ZIP	PITTSBURGH PA			1.4 CI	TY - \$1	1-7IP				1
TITLE	DP		DELETE	2.1 11					Change	Addition
NAME	PARRINGTON, W. THOMAS	JR.		22 N/	MF]		•	_
STREET ADDRESS	FOSTER PLAZA X, 680 AND					ADDRESS				
CITY - ST - ZIP	PITTSBURGH PA 15220			2.4 C			(1)	,		Ī
TITLE	D		DELETE	3.1 TII		, En.			Change	Addition
NAME	FINE, DAVID J			32 N						
STREET ADDRESS	262 ARNOLD ROAD					ADDRESS				
CITY-ST-ZIP	NEWTON MA								1	
TITLE	D D		DELETE	3.4. CI 4.1 Til		1-212	-	71	Change	Addition
NAME	SMITH, STEVEN J			4. 2 N					hisanifia	
STREET ADDRESS	30 LAUREL ROAD PO BOX 8	40				ADDRESS				
	PINEHURST NC	n y					i			
CITY-ST-ZIP TITLE	THE PONCE IN		DELETE	4.4 CI 5.1 TII		- ZIP	VP		Change	Addition
							1 - 1	L.)	שמוואוול	NOOHION CON
NAME				5.2 NA			J. William Richardson 3323 Ponok a Poad			1
STREET ADDRESS						ADDRESS				1
CITY-ST-ZIP			T DOLOTE	5 4 CI		- 21P	Pittsburgh, PA 15241			114.000
THTLE			DELETE	6.1 717				L	Change	Addition
NAME				6.2 NA						
STREET ADDRESS				6.3 ST	REET	address				
CITY-ST-ZIP	L			6.4 CI	TY-ST	- Z IP	<u> </u>			

14. Thereby 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 suppliemental 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.

About a Hill T will am Dichandens 4-16-99 45 927-1400