

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90113 019 ***150.00

DOCUMENT # F95000005013

1. Entity Name
ALAFAYA HOTEL CO., INC.



Principal Place of Business
1629 WINCHESTER ROAD
MEMPHIS TN 38116

Mailing Address
1629 WINCHESTER ROAD
MEMPHIS TN 38116



2. Principal Place of Business
8700 TRAIL LAKE DR. West

3. Mailing Address
8700 Inail Lake Drive West

Suite, Apt. #, etc.
300

Suite, Apt. #, etc.
300

City & State
Memphis, TN

City & State
Memphis, TN

4. FEI Number
62-1617447

Applied For
Not Applicable

Zip
38125

Country

Zip
38125

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☒ **CHECK HERE IF MAKING CHANGES**

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD	WILSON, C. KEMMONS JR	<input type="checkbox"/> Delete
STREET ADDRESS	1629 WINCHESTER ROAD	
CITY-ST-ZIP	MEMPHIS TN 38116	
TITLE DV	WILSON, SPENCE	<input type="checkbox"/> Delete
STREET ADDRESS	1629 WINCHESTER ROAD	
CITY-ST-ZIP	MEMPHIS TN 38116	
TITLE S	WALLIN, R E	<input type="checkbox"/> Delete
STREET ADDRESS	1629 WINCHESTER ROAD	
CITY-ST-ZIP	MEMPHIS TN 38116	
TITLE VPT	BATT, BILL	<input type="checkbox"/> Delete
STREET ADDRESS	1629 WINCHESTER ROAD	
CITY-ST-ZIP	MEMPHIS TN 38116	
TITLE VD	WILSON, ROBERT A	<input type="checkbox"/> Delete
STREET ADDRESS	1629 WINCHESTER RD	
CITY-ST-ZIP	MEMPHIS TN	
TITLE AT	MCCLAINE, GARY	<input type="checkbox"/> Delete
STREET ADDRESS	1629 WINCHESTER RD	
CITY-ST-ZIP	MEMPHIS TN 38116	

TITLE PD	C. Kemmons Wilson JR.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8700 TRAIL LAKE DR. West Suite 300	
CITY-ST-ZIP	Memphis, TN 38125	
TITLE DV	Spence Wilson	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8700 TRAIL LAKE DR. West Suite 300	
CITY-ST-ZIP	Memphis, TN 38125	
TITLE S	R.E. Wallin	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8700 TRAIL LAKE DR. West Suite 300	
CITY-ST-ZIP	Memphis, TN 38125	
TITLE VPT	Bill Batt	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8700 TRAIL LAKE DR. West Suite 300	
CITY-ST-ZIP	Memphis, TN 38125	
TITLE VD	Robert Wilson	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8700 TRAIL LAKE DR. West Suite 300	
CITY-ST-ZIP	Memphis, TN 38125	
TITLE AT	Gary McClain	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8700 TRAIL LAKE DR. West Suite 300	
CITY-ST-ZIP	Memphis, TN 38125	

12. 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 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
Bill Batt

4/3/03 901-346-8800
Date Daytime Phone #

CR2E034 (10/02)