Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90080 002 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F95000006065

EXTENDI	ED STAY AMERICA, INC.								
Principal Place	of Business	Mailing Address	•••			- I EDDTION SOON HOURT WIFTE MAINS ANDIS	/ <b>00</b> FIL <b>00</b> FIL <b>0</b>	ILI <b>d d</b> ene <b>da</b> nn	9 Arian Antions
450 E LAS OLAS BLVD SUITE 1100 FORT LAUDERDALE FL 33301 US  450 E LAS OLAS BLVD SUITE 1100 FORT LAUDERDALE FL 33301 US						DO NOT WRITE  3. Date Incorporated or Qualifed  12/13/1995	E IN THIS S	SPACE	
5 Division ( Di		2a. Mailing Address				4. FEI Number		- I A	pplied For
	ace of Business	26 .				36-3996573		<u> </u>	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				Certificate of Status Desired		\$8.75	Additional equired
22     27			e			6. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution		•	to Fees	
Zip	Country	Zip				8. This corporation owes the curre	nt year Inta	ngible	
24	25 29 30					Personal Property Tax.		☐Yes	□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered A	gent	
0.7	CORDODATION SVOTEM			81	Name				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				82	Street Addre	ess (P.O. Box Number is Not Acceptate	ole)		
PLANTATION FL 33324				83					
				84	City		FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statut	es, the ab	ove	-named corpo	pration submits this statement for the p	ournose of c	hanging its	s registered
t office or re	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was a	utnorizea	DV I	me corporatioi	n's board of directors. I hereby accept	the appoin	tment as re	egistered
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable /NOTE	· Paciatored /	Ageni	t signature required	when reinstation)	DATE		
12.	OFFICERS AN		13.	-90	s signature required	ADDITIONS/CHANGES TO OFF		DIRECT	ORS IN 12
TITLE	CCOB	DELETE	1.1 TITL	LE				Change	
NAME	HUIZENGA, H W		1.2 NAM	ME					
STREET ADDRESS	ASS T LAS OLAS BLVD STE 4400			1.3 STREET ADDRESS					
CITY-ST-ZIP	FT. LAUDERDALE FL 33301		1.4 C/T	Y-ST	-ZiP				
TITLE	PCEO DELETE		2.1 TITL	2.1 TITLE				☐ Change	☐ Addition
NAME	JOHNSON, GEORGE D JR		2.2 NAM	ME.					
STREET ADDRESS	450 E LAS OLAS BLVD STE 1100			2.3 STREET ADDRESS					ļ
CITY-ST-ZIP	FT. LAUDERDALE FL 33301		2. 4 CIT	ΓΥ- <u>S</u>	T-ZIP				
TITLE	CFOT	☐ DELETE	3.1 TFT	LE				Change	Addition
NAME	Brannon, Robert A		3.2 NA	3.2 NAME					
STREET ADDRESS	450 E LAS OLAS BLVD STE 11	00	3.3 STF	REET	ADDRESS				ĺ
CITY-ST-ZIP	FT. LAUDERDALE FL 33301		3.4. CIT		T-ZIP	<u></u>		[ ] Change	Addition
TITLE	V DELETE		1	4.1 TITLE				Criange	
NAME	OAKES, CORRY W			4. 2 NAME 4.3 STREET ADDRESS					
STREET ADDRESS	450 E LAS OLAS BLVD STE 11	UU							
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	☐ DELETE	4.4 CIT		-ZIP			☐ Change	Addition
TITLE	DECK MICHAELD	C DEFFIC	5.1 TITI 5.2 NA/					و	
NAME STREET ADORESS	BECK, MICHAEL R 450 e las olas blvd ste 11	100			ADDRESS				
STREET ADDRESS	FT. LAUDERDALE FL 33301	00	5.4 CIT						
CITY-ST-ZIP	ASAT	DELETE	6.1 TITI		<del></del>			Change	Addition
NAME	MOXLEY, GREGORY R	/-	6 2 NA	ME					ļ
STREET ADDRESS		00	6.3 STF	REET	ADDRESS				

14. 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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FT. LAUDERDALE FL 33301

UPISEC | TREAS