

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90172 040 ***150.00

DOCUMENT # F96000000462

1. Entity Name
ORANGE COUNTY HOTEL CO., INC.



Principal Place of Business
8700 TRAIL LAKE DR WEST
300
MEMPHIS, TN 38125

Mailing Address
8700 TRAIL LAKE DR WEST
300
MEMPHIS, TN 38125



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04122004

Chg-P

CR2E034 (10/03)

4. FEI Number

62-1626483

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, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME WILSON, ROBERT A
STREET ADDRESS 8700 TRAIL LAKE DRIVE WEST, STE 300
CITY-ST-ZIP MEMPHIS, TN 38125

TITLE D, VP ☒ Change ☐ Addition
NAME Robert A. Wilson
STREET ADDRESS SAME ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME BATT, BILL
STREET ADDRESS 8700 TRAIL LAKE DRIVE WEST, STE 300
CITY-ST-ZIP MEMPHIS, TN 38125

TITLE T, VP ☐ Change ☐ Addition
NAME Bill BATT
STREET ADDRESS Same address
CITY-ST-ZIP

TITLE S ☐ Delete
NAME CRENSHAW, CHIP
STREET ADDRESS 8700 TRAIL LAKE DRIVE WEST, STE 300
CITY-ST-ZIP MEMPHIS, TN 38125

TITLE AS, AT ☒ Change ☐ Addition
NAME Chip Crenshaw
STREET ADDRESS Same address
CITY-ST-ZIP

TITLE P ☐ Delete
NAME WILSON, C. KEMMONS JR
STREET ADDRESS 8700 TRAIL LAKE DRIVE WEST, STE 300
CITY-ST-ZIP MEMPHIS, TN 38125

TITLE P, D ☒ Change ☐ Addition
NAME Kem Wilson Jr
STREET ADDRESS Same address
CITY-ST-ZIP

TITLE D ☐ Delete
NAME WILSON, SPENCE
STREET ADDRESS 8700 TRAIL LAKE DRIVE WEST, STE 300
CITY-ST-ZIP MEMPHIS, TN 38125

TITLE VP, D ☒ Change ☐ Addition
NAME Spence Wilson
STREET ADDRESS Same address
CITY-ST-ZIP

TITLE S ☐ Delete
NAME WALLIN, R.E.
STREET ADDRESS 8700 TRAIL LAKE DRIVE WEST, STE 300
CITY-ST-ZIP MEMPHIS, TN 38125

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 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

April 12, 2004 901-346-8800

Date

Daytime Phone #