2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F9700000610 May 15, 2000 8:00 am Secretary of State CONTINENTAL RESERVATIONS INC. 05-15-2000 90208 036 ***150.00 Principal Place of Business Mailing Address P.O. BOX 4607 1600 SMITH ST HOUSTON TX 77002 HOUSTON TX 77210-4607 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 76-0517977 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ■ Addition CD Delete TITLE ☐ Change TITLE BETHUNE, GORDON M NAME NAME STREET ADDRESS 1600 SMITH ST STREET ADDRESS CITY-ST-ZIP **HOUSTON TX 77002** ☐ Delete ☐ Change Addition TITLE NAME BRENNEMAN, GREGORY D STREET ADDRESS STREET ADDRESS 1600 SMITH ST CITY-ST-ZIP CITY-ST-7IP **HOUSTON TX 77002** - Change ☐ Addition VTD Delete THILE NAME KELLNER, LAWRENCE W NAME STREET ADDRESS STREET ADDRESS 1600 SMITH ST CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77002** Delete TITLE ☐ Change ☐ Addition TITLE SMISEK, JEFFERY A NAME NAME STREET ADDRESS STREET ADDRESS 1600 SMITH ST CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77002** ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attackment with an address, with all other like empowered.