2000 UNIFORM BUSINESS REPORT (UBR)

FILED Sep 18, 2000 8:00 am Secretary of State DOCUMENT # F9700004108 CONVENTION HOSPITALITY, INC. 09-18-2000 90001 050 ***550.00 Principal Place of Business 8100 Ridge way Loop # 150 Mailing Address 8006 Rudgeway Loop #150 6141 WALNUT BROVE RD.: 37E, 200 00086251 MEMPHIS TN 38120 MEMPHIS TN 38120 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 62-1701484 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NEFF, A. GUY Street Address (P.O. Box Number is Not Acceptable) 200 S. ORANGE AVE., STE. 3000 ORLANDO FL 32801 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. П 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 11. 12. Change ☐ Addition TITLE TITLE 866 Ridgeway Loop PROSTERMAN, GARY J Style Ridgeway Loop NAME NAME Suite 150 STREET ADDRESS STREET ADDRESS -6141 WALNUT GROVE RD., STE. 200 Memphis, TN 38120 CITY-ST-ZIP CITY-ST-ZIP MEMPHIS TN 38120 Delete TITLE TITLE Change Addition NAME NAME WRIGHT, LISA STREET ADDRESS STREET ADDRESS 6141 WALNUT GROVE RD., STE. 200 CITY-ST-ZIP CITY-ST-ZIP MEMPHIS TN 38120 ☐ Change **Addition** TITLE Delete TITLE Susan Creekmore 866 Ridgeway Loop # 150 NAME NAME STREET ADDRESS STREET ADDRESS Memphis, TN 38120 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IF Change Addition TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Delete Change ☐ Addition 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 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

8-31-00

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