

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000374

FILED  
Apr 14, 2011  
Secretary of State

**Entity Name:** TISHMAN HOTEL CORPORATION

**Current Principal Place of Business:**

666 FIFTH AVENUE 36TH FLOOR  
NEW YORK, NY 10103

**New Principal Place of Business:**

**Current Mailing Address:**

666 FIFTH AVENUE 36TH FLOOR  
NEW YORK, NY 10103

**New Mailing Address:**

**FEI Number:** 22-3544998

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: CEOC  
Name: VICKERS, JOHN A  
Address: 666 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10103

Title: VP  
Name: PRAYLO, PAUL  
Address: 666 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10103

Title: EV  
Name: LIVINGSTON, JOHN T  
Address: 666 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10103

Title: EV  
Name: SALES, WILLIAM J  
Address: 666 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10103

Title: EV  
Name: SIMONE, JOSEPH J  
Address: 666 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10103

Title: EVD  
Name: TISHMAN, DANIEL R  
Address: 666 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10103

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PAUL PRAYLO

VP

04/14/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date