## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000003834

Entity Name: MSR HOSPITALITY GP CORP.

## **FILED** Apr 23, 2008 Secretary of State

Current Principal Place of Busines:	š:
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420 SOUTH ORANGE AVENUE

STE 700

STE 700

Title:

Title:

Title:

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address: City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

ORLANDO, FL 32801

**New Principal Place of Business:** 

1 POST OFFICE SQUARE STE 3100

BOSTON, MA 02109

**Current Mailing Address:** 

P.O. BOX 2226

ORLANDO, FL 328022226

THOMAS, STEPHANIE J

420 S ORANGE AVENUE

ORLANDO, FL 32801 US

in the State of Florida.

**New Mailing Address:** 

1 POST OFFICE SQUARE STE 3100

BOSTON, MA 02109

FEI Number: 59-3516676 FEI Number Applied For ( ) FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WRIGHT, DANIEL

1 POST OFFICE SQUARE STE 3100

BOSTON, FL 02109

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: DANIEL WRIGHT

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

( ) Delete

() Delete

420 S ORANGE AVENUE, STE 700

( ) Delete

420 S ORANGE AVENUE, STE 700

() Delete

() Delete

420 S ORANGE AVENUE, STE 700

( ) Delete

420 S ORANGE AVENUE, STE 700

BOURNE, ROBERT A

ORLANDO, FL 32801

ORLANDO, FL 32801

GRISWOLD, JOHN A

ORLANDO, FL 32801

SENEFF, JAMES M JR

ORLANDO, FL 32801

BLOOM, BARRY A.N.

ORLANDO, FL 32801

STRICKLAND, C. BRIAN

ORLANDO, FL 32801

450 S ORANGE AVENUE

DC

SEVP

450 S ORANGE AVENUE

HUTCHISON, THOMAS J III

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title:

(X) Change ( ) Addition

Name: DINA, JIM

1 POST OFFICE SQUARE STE 3100 Address:

BOSTON, MA 02109 City-St-Zip:

Title: VΡ (X) Change ( ) Addition

FIELDS, WARREN Name:

1 POST OFFICE SQUARE STE 3100 Address:

BOSTON, MA 02109 City-St-Zip:

Title: VΡ (X) Change ( ) Addition

BUZA, JOHN Name:

1 POST OFFICE SQUARE STE 3100 Address:

City-St-Zip: BOSTON, MA 02109

Title: VΡ (X) Change ( ) Addition

QUINN, MICHAEL Name:

Address: 1 POST OFFICE SQUARE STE 3100

City-St-Zip: BOSTON, MA 02109

Title: (X) Change ( ) Addition

Name: FOSTER, MICHAEL

Address: 1 POST OFFICE SQUARE STE 3100

City-St-Zip: BOSTON, MA 02109

Title: (X) Change ( ) Addition

HARNED, PETÉR Name:

1 POST OFFICE SQUARE STE 3100 Address:

Date

City-St-Zip: BOSTON, MA 02109

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DANIEL WRIGHT VΡ 04/23/2008