

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 19, 2000 08:00 AM
Secretary of State

DOCUMENT # F98000004367

1. Entity Name
 CNL HOSPITALITY PROPERTIES, INC.

Principal Place of Business 400 EAST SOUTH STREET, SUITE 500 ORLANDO FL 32801	Mailing Address 400 EAST SOUTH STREET, SUITE 500 ORLANDO FL 32801
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2. Principal Place of Business 450 S. ORANGE AVENUE	3. Mailing Address 450 S. ORANGE AVENUE
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State ORLANDO FL	City & State ORLANDO FL
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4. FEI Number 59-3396369	Applied For <input type="checkbox"/> Not Applicable
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Zip 32801	Country	Zip 32801	Country
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WHITEJOHNSON KYLE L
 400 EAST SOUTH STREET, SUITE 500
 ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name
 BOURNE ROBERT A
 Street Address (P.O. Box Number is Not Acceptable)
 450 S. ORANGE AVENUE
 City
 ORLANDO FL Zip Code
 32801

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 ROBERT A. BOURNE DATE 01/19/2000
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ROSE LYNN E 400 EAST SOUTH STREET, SUITE 500 ORLANDO FL 32801 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRUSE JOSEPH 400 EAST SOUTH STREET, SUITE 500 ORLANDO FL 32801 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOSTETTER RICHARD 400 EAST SOUTH STREET, SUITE 500 ORLANDO FL 32801 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUSEMAN RICHARD 400 EAST SOUTH STREET, SUITE 500 ORLANDO FL 32801 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOURNE ROBERT A 400 EAST SOUTH STREET, SUITE 500 ORLANDO FL 32801 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SENEFF JAMES MJR 400 EAST SOUTH STREET, SUITE 500 ORLANDO FL 32801 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ROSE LYNN E 450 S. ORANGE AVENUE ORLANDO FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCALLASTER CRAIG M 450 S. ORANGE AVENUE ORLANDO FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS CHARLES E 450 S. ORANGE AVENUE ORLANDO FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRISWOLD JOHN A 450 S. ORANGE AVENUE ORLANDO FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOURNE ROBERT A 450 S. ORANGE AVENUE ORLANDO FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SENEFF JAMES MJR 450 S. ORANGE AVENUE ORLANDO FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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 LYNN E ROSE

01/19/2000

**KYLE L. WHITEJOHNSON, AS
450 S. ORANGE AVENUE**

ORLANDO, FL 32801

**C. BRIAN STRICKLAND, VP
450 S. ORANGE AVENUE**

ORLANDO, FL 32801

**CHARLES A. MULLER, COO/EVP
450 S. ORANGE AVENUE**

ORLANDO, FL 32801

**JEANNE A. WALL, EVP
450 S. ORANGE AVENUE**

ORLANDO, FL 32801

**LAWRENCE A. DUSTIN, DIRECTOR
450 S. ORANGE AVENUE**

ORLANDO, FL 32801

**MATTHEW W. KAPLAN, DIRECTOR
450 S. ORANGE AVENUE**

ORLANDO, FL 32801