

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90046 007 ***150.00

DOCUMENT # F98000005169

1. Entity Name
MERISTAR HOSPITALITY CORPORATION



Principal Place of Business
**1010 WISCONSIN AVENUE, NW
WASHINGTON DC 20007**

Mailing Address
**1010 WISCONSIN AVENUE, NW
WASHINGTON DC 20007**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **75-2648842**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILES, BRUCE 1010 WISCONSIN AVENUE, NW, SUITE 650 WASHINGTON DC 20007	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO WHETSELL, PAUL 1010 WISCONSIN AVENUE, NW WASHINGTON DC 20007	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EMERY, JOHN 1010 WISCONSIN AVENUE, NW WASHINGTON DC 20007	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS BENNETT, CHRISTOPHER 1010 WISCONSIN AVENUE, NW WASHINGTON DC 20007	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S Jerome J. Kraisinger 1010 Wisconsin Ave., N.W. Washington, D.C. 20007	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T Donald D. Olinger 1010 Wisconsin Ave., N.W. Washington, D.C. 20007	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V J. Brooks Martin 1010 Wisconsin Ave., N.W. Washington, D.C. 20007	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D James Dannhauser 1010 Wisconsin Ave., N.W. Washington, D.C. 20007	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D H. Cabot Lodge, III 1010 Wisconsin Ave., N.W. Washington, D.C. 20007	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Steven Jorns 1010 Wisconsin Ave., N.W. Washington, D.C. 20007	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jerome J. Kraisinger

4/18/03

202-295-2234

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attach

CR2E034 (10/02)

Attachment
90100665

Document #F98000005169 (Attachment)
MeriStar Hospitality Corporation

Officers and Directors

Additions

Director: Ellen Shuman
1010 Wisconsin Avenue, NW
Washington, DC 20007

Director: J. Taylor Crandall
1010 Wisconsin Avenue, NW
Washington, DC 20007

Director: James R. Worms
1010 Wisconsin Avenue, NW
Washington, DC 20007

Director: William S. Janes
1010 Wisconsin Avenue, NW
Washington, DC 20007