

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State

03-29-2001 90389 031 ***150.00

0608609

DOCUMENT # F98000006687
 1. Entity Name
INTERSTATE HOTELS CORPORATION

Principal Place of Business Mailing Address
680 ANDERSEN DRIVE, FOSTER PLAZA TEN **680 ANDERSEN DRIVE, FOSTER PLAZA TEN**
PITTSBURGH PA 15220 **PITTSBURGH PA 15220**

734870



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State

4. FEI Number **75-2767215** Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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.

SIGNATURE _____ DATE _____
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, 2001 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	PD PARRINGTON, W. THOMAS JR 680 ANDERSEN DRIVE, FOSTER PLAZA TEN PITTSBURGH PA 15220 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ALIBHAI, KARIM 680 ANDERSEN DRIVE, FOSTER PLAZA TEN PITTSBURGH, PA 15220 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MORELAND, CARLA S 680 ANDERSEN DRIVE, FOSTER PLAZA TEN PITTSBURGH PA 15220 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LATTIN, THOMAS W 680 ANDERSEN DRIVE, FOSTER PLAZA TEN PITTSBURGH PA 15220 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RICHARDSON, J. WILLIAM 680 ANDERSEN DRIVE, FOSTER PLAZA TEN PITTSBURGH PA 15220 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HUDAK, TIMOTHY Q 680 ANDERSEN DRIVE, FOSTER PLAZA TEN PITTSBURGH PA 15220 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Kevin P. Killeary 521 Salem Heights Drive Gibsonia, PA 15044 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Thomas F. Hewitt 1055 St. Mellon Drive Nevillewood, PA 15142 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	F/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S <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: J. William Richardson **J. William Richardson** 3/29/01 412-937-0600
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/00)