

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90368 016 ***150.00

DOCUMENT # F98000006687

1. Entity Name

INTERSTATE HOTELS CORPORATION

Principal Place of Business

**680 ANDERSEN DRIVE, FOSTER PLAZA TEN
 PITTSBURGH PA 15220**

Mailing Address

**680 ANDERSEN DRIVE, FOSTER PLAZA TEN
 PITTSBURGH PA 15220**

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

75-2767215

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME **P** ☐ Delete
KILKEARY, KEVIN P
 STREET ADDRESS
 CITY-ST-ZIP **521 SALEM HEIGHTS DRIVE
 GIBSONIA PA 15044**

TITLE
 NAME **COO** ☒ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME **D** ☐ Delete
ALIBHAI, KARIM
 STREET ADDRESS
 CITY-ST-ZIP **680 ANDERSEN DRIVE, FOSTER PLAZA TEN
 PITTSBURGH PA 15220**

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME **C** ☐ Delete
HEWITT, THOMAS F
 STREET ADDRESS
 CITY-ST-ZIP **1055 ST MELLION DRIVE
 NEVILLEWOOD PA 15142**

TITLE
 NAME **PD** ☒ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME **TD** ☐ Delete
RICHARDSON, J. WILLIAM
 STREET ADDRESS
 CITY-ST-ZIP **680 ANDERSEN DRIVE, FOSTER PLAZA TEN
 PITTSBURGH PA 15220**

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME **VS** ☐ Delete
HUDAK, TIMOTHY Q
 STREET ADDRESS
 CITY-ST-ZIP **680 ANDERSEN DRIVE, FOSTER PLAZA TEN
 PITTSBURGH PA 15220**

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

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** 4/9/02 412-937-0600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)