2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000938

Entity Name: HMC HOSPITALITY OPERATING COMPANY

FILED Jan 14, 2004 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

15400 KNOLL TRAIL, STE 201 17950 PRESTON ROAD STE 200

SUITE 710 DALLAS, TX 75248 DALLAS, TX 75252

New Mailing Address: Current Mailing Address:

17950 PRESTON ROAD 15400 KNOLL TRAIL, STE 201 STE 200 SUITE 710

DALLAS, TX 75248 DALLAS, TX 75252

FEI Number: 75-2778578 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:

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

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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SPRIGGS, LEO E SPRIGGS, LEO E Name: Name: 15400 KNOLL TRAIL, STE 201 17950 PRESTON ROAD Address: Address: City-St-Zip: DALLAS, TX City-St-Zip: DALLAS, TX 75252

Title: VSD Title: VSD (X) Change () Addition () Delete

Name: SULLIVAN, BILL Name: SULLIVAN, BILL 15400 KNOLL TRAIL, STE 201 17950 PRESTON ROAD Address: Address: DALLAS, TX 75252 City-St-Zip: DALLAS, TX City-St-Zip:

Title: Title: (X) Change () Addition () Delete

KILLIAN, DANIEL Name: KILLIAN, DANIEL Name: 15400 KNOLL TRAIL, STE 201 Address: 17950 PRESTON ROAD Address: City-St-Zip: DALLAS, TX City-St-Zip: DALLAS, TX 75252

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BILL SULLIVAN MR. 01/14/2004