

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2001 8:00 am**  
**Secretary of State**  
 05-02-2001 90166 040 \*\*\*150.00

0569078

**DOCUMENT # F99000003144**

1. Entity Name

**PATRIOT AMERICAN HOSPITALITY, INC.**

Principal Place of Business

Mailing Address

**1950 STEMMONS FREEWAY, SUITE 6001  
 DALLAS TX 75202**

**1950 STEMMONS FREEWAY, SUITE 6001  
 DALLAS TX 75202**

00040003

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **97-2879337**

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

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DCEO** ☐ Delete  
 NAME **CARREKER, JIM**  
 STREET ADDRESS **1950 STEMMONS FREEWAY, SUITE 6001**  
 CITY-ST-ZIP **DALLAS TX 75202**

TITLE **CEO & President** ☒ Change ☐ Addition  
 NAME **Fred Kleisner**  
 STREET ADDRESS **1950 Stemmons Frwy, Ste 6001**  
 CITY-ST-ZIP **Dallas, Tx 75207**

TITLE **PDCO** ☐ Delete  
 NAME **EVANS, WILLIAM W III**  
 STREET ADDRESS **1950 STEMMONS FREEWAY, SUITE 6001**  
 CITY-ST-ZIP **DALLAS TX 75202**

TITLE **COO & Exec V.P.** ☒ Change ☐ Addition  
 NAME **Ted Teng**  
 STREET ADDRESS **1950 Stemmons Frwy, Ste 6001**  
 CITY-ST-ZIP **Dallas Tx 75207**

TITLE **EVPC** ☐ Delete  
 NAME **RAYMOND, ANNE L**  
 STREET ADDRESS **1950 STEMMONS FREEWAY, SUITE 6001**  
 CITY-ST-ZIP **DALLAS TX 75202**

TITLE **CEO & Exec. V.P.** ☒ Change ☐ Addition  
 NAME **Rick Smith**  
 STREET ADDRESS **1950 Stemmons Frwy, St 6001**  
 CITY-ST-ZIP **Dallas, Tx 75207**

TITLE **EVPT** ☐ Delete  
 NAME **JONES, LAWRENCE S**  
 STREET ADDRESS **1950 STEMMONS FREEWAY, SUITE 6001**  
 CITY-ST-ZIP **DALLAS TX 75202**

TITLE **SR. V.P. & Treasurer** ☒ Change ☐ Addition  
 NAME **Judy Hendrick**  
 STREET ADDRESS **1950 Stemmons Frwy, St 6001**  
 CITY-ST-ZIP **Dallas, Tx 75207**

TITLE **SVPS** ☐ Delete  
 NAME **BOHLMAN, JOHN**  
 STREET ADDRESS **1950 STEMMONS FREEWAY, SUITE 6001**  
 CITY-ST-ZIP **DALLAS TX 75202** **OK**

TITLE **SVPS** ☐ Change ☐ Addition  
 NAME **John Bahlmann**  
 STREET ADDRESS **1950 Stemmons Frwy, St 6001**  
 CITY-ST-ZIP **Dallas Tx 75207**

TITLE **D** ☐ Delete  
 NAME **NUSSBAUM, PAUL A**  
 STREET ADDRESS **1950 STEMMONS FREEWAY, SUITE 6001**  
 CITY-ST-ZIP **DALLAS TX 75202**

TITLE **Sr VP & Asst Sec.** ☒ Change ☐ Addition  
 NAME **John Morse**  
 STREET ADDRESS **1950 Stemmons Frwy St 6001**  
 CITY-ST-ZIP **Dallas Tx 75207**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 149.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-23-01**

Date

**214 863 1000**

Daytime Phone #

CR2E034 (10/00)