2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000022707

Entity Name: CALPAC HOTELS, INC.

City-St-Zip:

SARASOTA, FL 34236

FILED Jan 23, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 700 BENJAMIN FRANKLIN DRIVE SARASOTA, FL 34236 **Current Mailing Address: New Mailing Address:** 700 BENJAMIN FRANKLIN DRIVE SARASOTA, FL 34236 FEI Number: 65-1082170 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHOUTEN, DIANE 7000 BENJAMIN FRANKLIN DRIVE SARASOTA, FL 34236 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: (X) Change () Addition () Delete Title: HASSELL, ROBERT W HASSELL, ROBERT W Name: Name: 700 BENJAMIN FRANKILIN DRIVE 700 BENJAMIN FRANKILIN DRIVE Address: Address: City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236 Title: PD (X) Delete Title: () Change () Addition Name: ROBIN, CARLA Name: 21852 16TH AVENUE Address: Address: LANGLEY, B.C., CN City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition VD VD. SCHOUTEN, DIANE SCHOUTEN, DIANE Name: Name: 751 PERCHERON CIRCLE 700 BENJAMIN FRANKLIN DRIVE Address: Address: City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: SARASOTA, FL 34236 Title: () Delete Title: () Change () Addition HASSELL, FLORENCE Name: Name: Address: 700 BENJAMIN FRANKLIN DRIVE Address:

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.

City-St-Zip:

SIGNATURE: DIANE SCHOUTEN VD 01/23/2003