## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

1. Corporation Name

P06211

LANE HOTELS, INC. Principal Place of Business Mailing Address 1200 SHERMER ROAD 1200 SHERMER ROAD ONE LANE CENTER ONE LANE CENTER NORTHBROOK IL 60062-4500 NORTHBROOK IL 60062-4500 3. Date Incorporated or Qualified 3a. Date of Last Report 05/29/1985 05/01/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 36-3087906 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zφ Country Zip Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 X Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD 83 PLANTATION FL 33324 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required which reinstating) Signature, typed or printed name of registered agent and title riapplicable CR2E034 (12/95) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELF1E TITLE 1. 1 TITLE Change Addition T - Assistant Treasurer LANE, WILLIAM N. III NAME 1.2 NAME Scott R. Schory 1200 SHERMER ROAD STREET ADDRESS 1.3 STREET ADDRESS 1200 Shermer Road NORTHBROOK IL CITY-\$1-ZIP 1.4 City - ST-ZIP Northbrook, IL 60062 TITLE DELETE 2. 1 TITLE Change Addition KALEBIC, THOMAS V. 2.2 NAME 1200 SHERMER ROAD STREET ADDRESS 2.3 STREET ADDRESS NORTHBROOK IL CITY-ST-ZIP 24 CHY- S1- ZIP DELETE TITLE . [] Change Addition 3.1 TITLE RIJOS, JOHN P NAME 3.2 NAME 1200 SHERMER RD. STREET ADDRESS 3.3 STREET ADDRESS NORTHBROOK IL CITY-ST-ZIP 3.4 CITY - \$1 - ZIP DELETE TITLE 4. 1 TITLE Addition SCHILLER, ARTHUR J. NAME 4.2 NAME 1200 SHERMER ROAD STREET ADDRESS 4.3 STREET ADDRESS NORTHBROOK IL CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE Change 5. 1 TITLE ☐ Addition DONAHUE, MICHAEL R. NAME 5.2 NAME 1200 SHERMER RD STREET ADDRESS 5.3 STREET ADDRESS NORTHBROOK IL CITY-ST-ZIP 5.4 CITY - \$1 - 2(P DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS

6.4 CITY-ST-7/P 14. I do hereby certify that the information supplies with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am an officer or director of the corps along in the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or

John P. Rijos President YPED OF RINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/96

or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name attachment with an address.

**FILED** 

Secretary of State

May 01 1996 8:00 am

(847)498-6789