

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P06211

1. Entity Name
LANE HOTELS, INC.

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90052 002 ***158.75

C0045319



DO NOT WRITE IN THIS SPACE

Principal Place of Business
1200 SHERMER ROAD
ONE LANE CENTER
NORTHBROOK IL 60062-4500

Mailing Address
1200 SHERMER ROAD
ONE LANE CENTER
NORTHBROOK IL 60062-4500

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 36-3087906

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 DC ☒ Delete
NAME LANE, WILLIAM N. III
STREET ADDRESS 1200 SHERMER ROAD
CITY-ST-ZIP NORTHBROOK IL

TITLE S, D ☐ Change ☒ Addition
NAME RANGER, JENNIFER
STREET ADDRESS 1200 SHERMER RD, NORTHBROOK IL
CITY-ST-ZIP

TITLE DT ☒ Delete
NAME KALEBIC, THOMAS V.
STREET ADDRESS 1200 SHERMER ROAD
CITY-ST-ZIP NORTHBROOK IL

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

TITLE PD ☒ Delete
NAME RIJOS, JOHN P
STREET ADDRESS 1200 SHERMER RD.
CITY-ST-ZIP NORTHBROOK IL

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

TITLE S ☒ Delete
NAME SCHILLER, ARTHUR J.
STREET ADDRESS 1200 SHERMER ROAD
CITY-ST-ZIP NORTHBROOK IL

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

TITLE V ☐ Delete
NAME DEFORREST, WILLIAM J
STREET ADDRESS 1200 SHERMER ROAD
CITY-ST-ZIP NORTHBROOK IL

TITLE P, D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME SCHORY, SCOTT R
STREET ADDRESS 1200 SHERMER ROAD
CITY-ST-ZIP NORTHBROOK IL

TITLE T, D ☒ Change ☐ Addition
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM DEFORREST 3/26/01

Date

847/498-6650

Daytime Phone #

CR2E034 (10/00)