FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P11148

(4)

Mailing Address

GROSVENOR DUTCH INN, INC.

FILED Feb 19 1997 8:00am Secretary of State

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	NOR PROPERTIES LTD. : STREET, SUITE 800 CO CA 94104	C/O GROSVENOR PROPE 160 SANSOME STREET. S SAN FRANCISCO CA 941	SUITE BOO).		Date Incorporated or Qualified										
						08/18/1986 01/25/1996										
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number Applied For										
21		26				94-2189328 Not Applicable										
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required										
City & Stat		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution										
Zip 24	Country 25	Zip 29	30 Cou	ntry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No										
	9. Name and Address of Curren	it Registered Agent				10. Name and Address of New Registered Agent										
CT (CORPORATION SYSTEM			81	Name											
	0 S. PINE ISLAND ROAD INTATION FL 33324				Street Addre	ess (P.O. Box Number is Not Acceptable)										
				B3												
				84	City	FL 85 Zip Code										
office or r	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was ations of, Section 607.0505, F	authorizei Iorida Stat	d by th utes.	ne corporati	coration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered and when renetating) DATE										
	Signature, typed or printed name of registered age OFFICERS AN		13.	n Ageni	signature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12										
12.	PD OFFICERS AIV	DELETE	1.1 Tr	TI E	1.7	ICE PRESIDENT (V) Change Addition										
NAMÉ	WERBY, DONALD E	bcccic	1.2 N/			DANIEL CROLET										
STREET ADDRESS				REET AD	norce 14	SASONE ST. # 800										
CITY - ST - ZIP	SAN FRANCISCO CA			TY-ST-	Unicas C	AM FRANCISCO, CA 94104										
TITLE	CD	DELETE	2.1 10			CE PRESIDENT (V) LI Change Addition										
NAME	WERBE, ROBERT K		2.2 N			usamme gallagher										
STREET ADDRESS	160 SANSOME ST., #800		- 8	reet ad		o sansume st. , # 800										
City-St-7iP	SAN FRANCISCO CA			ITY-ST-		AM FRANCISCO, CA 94104										
TITLE	VD	DELETE	3.1 Ti			CE PRESIDENT (U) Change Addition										
NAME.	WERBY, TODD		3.2 N	AME	MI	IKECHING										
STREET ADDRESS	160 SANSOME ST., #800		1	REET AD	DRESS 160	o sansome et. #800										
CITY-ST-ZIF	SAN FRANCISCO CA		f	ITY-ST-		AN FRANCISCO, CA 74/04										
TITLE	VD	DELETE	4.1 TI			Change Addition										
NAME	WERBE, THOMAS A		4. 2 N	AME												
STREET ADDRESS			4.3 \$1	IREET AC	DRESS											
CITY-ST-7P	SAN FRANCISCO CA		4.4 CI	TY-ST-	ZIP											
TITLE	V	☐ DELETE	51 Ti	TLE		Change Addition										
NAME	WERBY, CHRISTOPHER		52 N	AME												
STREET ADDRESS	160 SANSOME ST., #800		5.3 ST	REET AD	ORESS											
CITY - ST - ZIP	SAN FRANCISCO CA		5.4 CI	TY-ST-	ZIP											
TITLE	VT	DELETE	6.1 TI	TLE		Change Addition										
NAME	NOKES, STEVEN		6.2 N/	AME												
STREET ADDRESS	160 SANSOME ST., #800		6.3 S	TREET AL	DRESS											
CiTY - ST - ZIP	SAN FRANCISCO CA		6.4 CI	TY-\$1	ZIP											

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NOKES

2-11-97 (415) 421

Daytime Phone #