SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P11148

(4)

GROSVENOR DUTCH INN, INC.

FILED Jul 15 1998 8:00am Secretary of State

Principal Place of Business Mailing Address											IE EBAT BLBIT bib i	IŞ WEBEL DIWER DIDEN DIDIN EDDI	
C/O GROSVENOR PROPERTIES LTD. C/O GROSVENOR PROPERTI					RTIFS I TO	IES LTD.							
160 SANSOME STREET, SUITE 600 160 SANSOME STREET. SUIT													
SAN FRANCISCO CA 94104			SAN FRANCISCO CA 941D4				L	DO NOT WRITE IN THIS SPACE					
										3. Date Incorporated or Qualified 08/18/1986			
2.	Principal Pl	ace of Business		2a. Mailin	g Address					4. FEI Number	•	Applied For	
21				26				9 4- 21 89 328		Not Applicable			
	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	X	\$8.75 Additional			
22	2			27				5. Certificate of Status Desired	<i>P</i>	Fee Required			
	City & State			City & State				6. Election Campaign Financing	_	\$5.00 May Be			
23				28				Trust Fund Contribution	<u> </u>	Added to Fees			
	Zip		ountry	Zip	Zip Country				8. This corporation owes or has pa				
24	25 29								Personal Property Tax due June 30. X Yes No				
			Address of Current I	Registered A	Agent					10. Name and Address of New Ro	egistered A	gent	
		ORPORATION :					81	Name					
		s. Pin e Islan					82	Street	Address	Address (P.O. Box Number is Not Acceptable)			
	PLAN	itation fl 333	124										
		į					63						
ì							City			FL	85 Zip Code		
		41	6		Flacida Osas da	- 46				ion cubmits this statement for the out		nging its registered	
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.													
SI	GNATURE .	Signature, typed or printe	a thega baralaiges to aman be	nd litle if applicab	le. (NC	OTE: Registe	red Aç	gent signalu	ura required	d when reinstating)	DATE		
12										ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTORS IN 12	
TIT	LE	PD	•		DELETE	1.1 TI	LE		V		Ę.	Change Addition	
NA					1.2 NAME			DAI	piel croley		•		
STE	REET ADDRESS 160 SANSOME ST., #800				1.3 \$10		REET	ADDRESS					
CIT	TY-ST-ZIP SAN FRANCISCO CA				1.4 CITY-S		-ZIP	SA	N FRANCISCO CA				
TIT	LE	CD			DELETE	2.1 TI	ΓLE		V			Change Addition	
NA	ME	WERBE, ROBE				2.2 NA	ME		54	SANNE GALLAGH	بع	, ,	
STF	TREET ADDRESS 160 SANSOME ST., #800				2.3 STREET ADDRESS		ADDRESS	160	SANSOME ST	# 800	>		
ÇIT	ITY-ST-ZIP SAN FRANCISCO CA				2.4 CITY-S		·ZIP	54	N FRANCISCO CA				
TIT	LE	VD ,			DELETE	3.1 TI	ΓLE					Change Addition	
NA	ME	WERBY, TODE)			3.2 NA	ME						
STE	STREET ADDRESS 160 SANSOME ST., #800		E ST., #800			3.3 STREET ADDRES		ADDRESS					
CIT	Y-ST-ZIP	SAN FRANCIS	CO CA			3.4 CI	TY-ST	-ŽIP					
TtT	LE	VD			DELETE	4.1 TI	LE					Change Addition	
NA	ME	WERBE, THOM				4.2 NA	ME						
STE	REET ADDRESS	160 SANSOME				4.3 ST	REET.	ADDRESS					
СІТ	Y-ST-ZIP	SAN FRANCIS	CO CA			4.4 CI	TY ST	ZIP	<u></u>				
TIT		V			DELETE	5.1 TI	TLE					Change Addition	
NA!	ME [WERBY, CHRIS			/ ·	5.2 NA	ME						
STE	REET ADDRESS	160 SANSOME				5.3 ST	REET	ADDRESS					
CIT	Y-ST-ZIP	SAN FRANCIS	CO CA			5.4 CI	TY-ST	-ZIP					
TIT	LE	VI			DELETE	6.1 TI	TLE.					Change Addition	
NA	ME	NOKES, STEV				6.2 NA	ME						
STE	REET ADDRESS	160 SANSOME				6.3 ST	REET	ADDRESS					
СІТ	Y-ST-ZIP	SAN FRANCIS	CO CA			6.4 CI	TY-ST-	-ZIP	<u> </u>				

14. 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 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.

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