


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2004 8:00 am**  
**Secretary of State**

05-05-2004 90218 026 \*\*\*150.00

<b>DOCUMENT # P11754</b>	
1. Entity Name <b>LA QUINTA REALTY CORP.</b>	

Principal Place of Business <b>909 HIDDEN RIDGE STE 600 IRVING, TX 75038 US</b>	Mailing Address <b>PO BOX 2636 N IRVING, TX 75038 US</b>
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2. Principal Place of Business  Suite, Apt. #, etc.	3. Mailing Address <b>909 HIDDEN RIDGE STE 600</b> Suite, Apt. #, etc.
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City & State  <b>IRVING, TX</b>	4. FEI Number <b>74-2429152</b>	Applied For <input type="checkbox"/> Not Applicable
Zip <b>75038</b>	Country <b>US</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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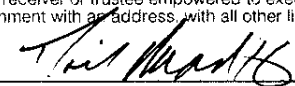
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CASH, FRANCIS W 909 HIDDEN RIDGE STE 600 IRVING, TX 75038 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCT REA, DAVID L 909 HIDDEN RIDGE, SUITE 600 IRVING, TX 75038 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MICHEL, SANDRA K 909 HIDDEN RIDGE SUITE 600 IRVING, TX 75038 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP TALLS, ALAN L 909 HIDDEN RIDGE STE 600 IRVING, TX 75038 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/CDO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BRADTKE, DAVID P 112 E PECAN ST 12TH FL DALLAS, TX 75205 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WILLIAMS, STEVEN J 909 HIDDEN RIDGE STE 600 IRVING, TX 75038 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WILLIAMS, SCOTT V. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **DAVID P. BRADTKE -VP** Date **4/26/04** Daytime Phone # **214-492-6939**

Attachment  
# P11754 24004624

**2004 For Profit Corporation Annual Report**

**La Quinta Realty Corp.**

**Document # P11754**

**11. ADDITIONAL OFFICERS AND DIRECTORS**

TREASURER

FLOWERS, STEVEN J.

909 HIDDEN RIDGE, STE 600,

IRVING, TX 75038

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