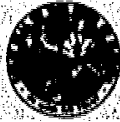


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P15446 (8)

1. Corporation Name

RESIDENCE INN BY MARRIOTT, INC.

**APPROVED
AND
FILED**

95 APR 19 PM 11:59

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

**10400 FERNWOOD ROAD
DEPT 82413
BETHESDA MD 20817
US**

Mailing Address

**10400 FERNWOOD ROAD
DEPT 82413
BETHESDA MD 20817
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/03/1987

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FBI Number

52-1519646

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

9. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

**81 Name
THE PRENTICE-HALL CORPORATION SYSTEM, INC.
82 Street Address (P.O. Box Number is Not Acceptable)
1201 HAYS STREET
83 SUITE 105
84 City
TALLAHASSEE FL 85 Zip Code
32301**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

OFFICERS AND DIRECTORS

TITLE	PD
NAME	RUFFER, MICHAEL R
STREET ADDRESS	10400 FERNWOOD ROAD
CITY - ST - ZIP	BETHESDA MD
TITLE	VD
NAME	WEST, STEPHEN A
STREET ADDRESS	10400 FERNWOOD ROAD
CITY - ST - ZIP	BETHESDA MD
TITLE	VD
NAME	STEIN, MICHAEL A
STREET ADDRESS	10400 FERNWOOD ROAD
CITY - ST - ZIP	BETHESDA MD
TITLE	S
NAME	MCGLOCKTON, JOAN RECTOR
STREET ADDRESS	10400 FERNWOOD ROAD
CITY - ST - ZIP	BETHESDA MD
TITLE	T
NAME	MURPHY, RAYMOND G
STREET ADDRESS	10400 FERNWOOD ROAD
CITY - ST - ZIP	BETHESDA MD
TITLE	AS
NAME	BENZ, NANCY L
STREET ADDRESS	10400 FERNWOOD ROAD
CITY - ST - ZIP	BETHESDA MD

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	VD JOSEPH RYAN
2.3 STREET ADDRESS	10400 FERNWOOD ROAD
2.4 CITY - ST - ZIP	BETHESDA, MD 20817
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	D WILLIAM J. SHAW
3.3 STREET ADDRESS	10400 FERNWOOD ROAD
3.4 CITY - ST - ZIP	BETHESDA, MD 20817
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 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:

Nancy L. Benz
SIGNATURE AND TYPED OR PRINTED NAME OF MORNING OFFICER OR DIRECTOR

Nancy L. Benz 4-12-95

Date

301-380-3000
Telephone Number