

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 18, 2003 8:00 am
Secretary of State

03-18-2003 90061 046 ***150.00

DOCUMENT # P26067

1. Entity Name
RAMADA FRANCHISE SYSTEMS, INC.



Principal Place of Business

**1 CAMPUS DRIVE
3RD FLOOR
PARSIPPANY NJ 07054
US**

Mailing Address

**1 CAMPUS DRIVE
3RD FLOOR
PARSIPPANY NJ 07054
US**

2. Principal Place of Business

1 Sylvan Way

Suite, Apt. #, etc.

3. Mailing Address

1 Campus Drive

Suite, Apt. #, etc.

Wing 3B, Legal dept.

City & State

Parsippany, NJ

City & State

Parsippany, NJ

Zip
07054

Country
USA

Zip
07054

Country
USA

4. FEI Number **22-2993446**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	
NAME	BUCKBERG, JOEL R	
STREET ADDRESS	1 CAMPUS DRIVE	
CITY-ST-ZIP	PARSIPPANY NJ 07054	
TITLE	D	☐ Delete
NAME	HOLMES, STEPHEN P	
STREET ADDRESS	1 CAMPUS DRIVE	
CITY-ST-ZIP	PARSIPPANY NJ 07054	
TITLE	PCEO	☒ Delete
NAME	BELMONTE, STEVEN J	
STREET ADDRESS	1 SYVAN WAY	
CITY-ST-ZIP	PARSIPPANY NJ 07054	
TITLE	EVPT	☐ Delete
NAME	COCROFT, DUNCAN H	
STREET ADDRESS	1 CAMPUS DRIVE	
CITY-ST-ZIP	PARSIPPANY NJ 07054	
TITLE	SVPS	☐ Delete
NAME	BOCK, ERIC J	
STREET ADDRESS	1 CAMPUS DRIVE	
CITY-ST-ZIP	PARSIPPANY NJ 07054	
TITLE	VPT	☐ Delete
NAME	HUBER, JOSEPH	
STREET ADDRESS	1 CAMPUS DRIVE	
CITY-ST-ZIP	PARSIPPANY NJ 07054	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Director	☒ Change ☐ Addition
NAME	Joel R. Buckberg	
STREET ADDRESS	1 Sylvan Way	
CITY-ST-ZIP	Parsippany, NJ 07054	
TITLE	Director	☐ Change ☒ Addition
NAME	Steven Rudnitsky	
STREET ADDRESS	1 Sylvan Way	
CITY-ST-ZIP	Parsippany, NJ 07054	
TITLE	President	☐ Change ☒ Addition
NAME	Paul Hanley	
STREET ADDRESS	1 Sylvan Way	
CITY-ST-ZIP	Parsippany, NJ 07054	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Executive VP/Secretary	☒ Change ☐ Addition
NAME	Eric J. Bock	
STREET ADDRESS	9 West 57th Street	
CITY-ST-ZIP	New York, NY 10019	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joseph Huber* **VP**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/03

Date

Daytime Phone #

CR2E034 (10/02)