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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P34524** (9)

1. Corporation Name

HALLWOOD HOTELS, INC.



Principal Place of Business

**4441 W. AIRPORT FRWY
IRVING TX 75062
US**

Mailing Address

**3710 RAWLINS
STE. 1500
DALLAS TX 75219
US**

3. Date Incorporated or Qualified

07/01/1991

3a. Date of Last Report

04/17/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 607.0502, Florida Statutes.

SIGNATURE

Signature typed or printed below of registered agent or director

Signature typed or printed below of registered agent or director

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	GUZZETTI, WILLIAM L	
STREET ADDRESS	3710 RAWLINS SUITE 1500	
CITY-STATE-ZIP	DALLAS TX	
TITLE	VSD	☐ DELETE
NAME	MELLE, MELVIN J.	
STREET ADDRESS	3710 RAWLINS, STE. 1500	
CITY-STATE-ZIP	DALLAS TX	
TITLE	T	☐ DELETE
NAME	KOENIG, JOSEPH P.	
STREET ADDRESS	3710 RAWLINS, STE. 1500	
CITY-STATE-ZIP	DALLAS TX	
TITLE	CD	☐ DELETE
NAME	GUMBINER, ANTHONY J.	
STREET ADDRESS	3710 RAWLINS, STE. 1500	
CITY-STATE-ZIP	DALLAS TX	
TITLE	V	☐ DELETE
NAME	MASON, KENNETH F.	
STREET ADDRESS	3710 RAWLINS, STE 1500	
CITY-STATE-ZIP	DALLAS TX	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	T/AS
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-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 119.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Melvin J. melle

4-16-96 (214) 528-5588

DATE DAYTIME PHONE

CR2E034 (12/95)