FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

ray it



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P34524

(9)

HALLWOOD HOTELS, INC.

FILED
May 01 1998 8:00am
Secretary of State

Zip Code

P	rincipal Place of Busines	SS	Mailing Addre	Mailing Address				141 BIĞI		
4441 W. AIRPORT FRWY IRVING TX 75062 US			3710 RAWLINS STE. 1500 DALLAS TX 75219				DO NOT WRITE IN THIS SPACE			
			US				3. Date Incorporated or Qualified 07/01/1991			
2. Principal Place of Business			2a. Mailing Ad	2a. Mailing Address			4. FEI Number		Applied For	
21			26	26			34-1682075		Not Applicable	
22	Suite, Apt. #, etc.		Suite, Apt	Suite, Apt. #, etc.			Certificate of Status Desired \$8.75 Additional Fee Required			
23			City & Sta	City & State			8. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
24	Zip	Country 25	Zip 29	30 Co	untry		8. This corporation owes or has paid the currer Personal Property Tax due June 30.	ot yea Yes	r Intangible	
	9. Name	p Country Zip 28 25 29 3 9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Ag	ent		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324							ress (P.O. Box Number is Not Acceptable)			
7					63	1				

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.

City

	m familiar with, and accept the obligations of, Se	ection 607.0505, FR	orida Statutės.			
SIGNATURE	Signature, typed or printed name of registered agent and lifts if ap-	plicable. (NOT	L: Registered Agent signature requi	ited when reinstating) DATE		
12.	OFFICERS AND DIRECTO		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	DELETE	1.1 TITLE	☐ Change	Addition	
NAME	GUZZETTI, WILLIAM Ł		1.2 NAME			
STREET ADDRESS	8710 RAWLINS SUITE 1500		1.3 STREET ADDRESS			
CITY-ST-ZIP	DALLAS TX		1.4 CITY-ST-ZIP			
TITLE	VSD	DELETE	2.1 TITLE	Change	Addition	
NAME	MELLE, MELVIN J.		2.2 NAME			
STREET ADDRESS	3 710 RAWLINS, STE. 1500		2.3 STREET ADDRESS			
CITY-ST-ZIP	DALLAS TX		2. 4 CITY-ST-ZIP	w.*		
TITLE	TAS	☐ DELET E	3.1 TITLE	☐ Change	Addition	
NAME	Koenig, Joseph P.		3.2 NAME			
STREET ADDRESS	3710 RAWLINS, STE. 1500		3.3 STREET ADDRESS			
CITY-ST-ZIP	DALLAS TX		3.4. CITY-ST-ZIP			
TITLE	CO	DELETE	4.1 TITLE	☐ Change	Addition	
NAME	GUMBINER, ANTHONY J.		4. 2 NAME			
STREET ADDRESS	3710 RAWLINS, STE. 1500		4.3 STREET ADDRESS			
CITY-ST-ZIP	DALLAS TX		4.4 CITY - ST - ZIP			
TITLE	V	DELETE	5.1 TITLE	Change	Addition	
NAME	Mason, Kenneth F.		5.2 NAME			
STREET ADDRESS	3710 RAWLINS, STE 1500		5.3 STREFT ADDRESS			
CITY-ST-ZIP	DALLAS TX		5.4 CITY-ST-ZIP			
TITLE		DELETE	6 1 1/TLE	☐ Change	Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREFT ADDRESS			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MASON, KENNETH F. 3710 RAWLINS, STE 1500 DALLAS TX		5.3 STREFT ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	☐ Chang	Çe	

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 of 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 of 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 inchanged, or on an attachment with an accuracy.