

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90727 020 ***150.00

DOCUMENT # P40719

1. Entity Name

WESTIN LICENSE COMPANY



Principal Place of Business

**1111 WESTCHESTER AVENUE
WHITE PLAINS NY 10604**

Mailing Address

**2231 E CAMELBACK RD
STE 400
PHOENIX AZ 85016**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E034 (11/03)

4. FEI Number

91-1539812

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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, 2004 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME DARNALL, THEODORE W
STREET ADDRESS 1111 WESTCHESTER AVENUE
CITY-ST-ZIP WHITE PLAINS NY 10604

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VT ☐ Delete
NAME DREW, JEFF S
STREET ADDRESS 2231 E CAMELBACK RD, STE 400
CITY-ST-ZIP PHOENIX AZ 85016

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VSD ☐ Delete
NAME SIEGEL, KENNETH S
STREET ADDRESS 1111 WESTCHESTER AVENUE
CITY-ST-ZIP WHITE PLAINS NY 10604

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AT ☐ Delete
NAME MORROW, PETER
STREET ADDRESS 2231 E CAMELBACK RD, STE 400
CITY-ST-ZIP PHOENIX AZ 85016

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VATD ☒ Delete
NAME BROWN, RONALD C
STREET ADDRESS 2231 E CAMELBACK RD, STE 400
CITY-ST-ZIP PHOENIX AZ 85016

TITLE VATD ☐ Change ☒ Addition
NAME Vasant Prabhu
STREET ADDRESS 1111 Westchester Avenue
CITY-ST-ZIP White Plains, NY 10604

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

P. Morrow

Peter Morrow

4-14-04 (602) 852-3900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #