## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P94000084911** Apr 20, 2000 8:00 am Secretary of State DAYTONA HOTEL CORPORATION 04-20-2000 90004 018 \*\*\*150.00 Principal Place of Business Mailing Address 433 CALIFORNIA ST STE. 700 433 CALIFORNIA ST STE. 700 SAN FRANCISCO CA 94104 SAN FRANCISCO CA 94104-2011 110403 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3283799 Not Applicable Zip Country Ziρ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MACKEY, JOHN MACKEY, JOHN Street Address (P.O. Box Number is Not Acceptable) 7550 AUGUSTA NATIONAL DRIVE 7550 AUGUSTA NATIONADRIVE 7550 AUGUSTA NATIONAL DRIVE ORLANDO FL 32822 <sup>Z</sup>io Code 32822 FL ORLANDO 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) ... Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 11. CPD ☐ Addition Change TITLE TITLE ☐ Delete LUI. LAWRENCE NAME NAME STREET ADDRESS STREET ADDRESS 700 EUCALYPTUS AVENUE CITY-ST-ZIP CITY-ST-ZIP HILLSBOROUGH CA ☐ Change Addition ☐ Delete TITLE TITLE LUI, GORRETTI NAME NAME 700 EUCALYPTUS AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HILLSBOROUGH CA ☐ Addition ☐ Delete Change TITLE TITLE CARTER, ANTONY NAME NAME STREET ADDRESS STREET ADDRESS 596 DALEWOOD DRIVE CITY-ST-ZIP CITY-ST-ZIP ORINDA CA 94563 ☐ Addition TITLE Change TITLE ☐ Delete WEIBLE, JOYCE M. NAME NAME STREET ADDRESS 433 CALIFORNIA ST 7TH FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA ☐ Change K Addition Delete TITLE LEUNG, WILFRED EVANS, JAMES E.M. NAME NAME 433 CALIFORNIA ST SAN FRANCISCO CA 7TH FL 94104-2011 STREET ADDRESS 433 CALFORNIA ST. 7TH FLOOR STREET ADDRESS CITY - ST - 7/P CITY-ST-ZIP SANFRANCISCO CA ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/00

(415) 398-3333

Daytime Phone #