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Apr 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000016576 (6)

1. Corporation Name

DESTINATION PALM COAST HOTEL, INC.



Principal Place of Business

11777 SAN VICENTE BOULEVARD
SUITE 900
LOS ANGELES CA 90049

Mailing Address

11777 SAN VICENTE BOULEVARD
SUITE 900
LOS ANGELES CA 90049-5011

2. Principal Place of Business

21 Harborside Inn at Palm Coast

Suite, Apt. #, etc.

22 300 Clubhouse Drive

City & State

23 Palm Coast, FLA

Zip

24 32137

Country

25 USA

2a. Mailing Address

Suite, Apt. #, etc.

27 City & State

Zip

29

Country

30

3. Date Incorporated or Qualified

02/22/1996

3a. Date of Last Report

1st Report

4. FEI Number

59-3362781

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME PLATT, JOHN B III
STREET ADDRESS 196 LA VERDE ROAD
CITY-ST-ZIP SANTA BARBARA CA 93108

TITLE D ☐ DELETE
NAME LOWE, ROBERT
STREET ADDRESS 11777 SAN VICENTE BOULEVARD, SUITE 900
CITY-ST-ZIP LOS ANGELES CA 90049

TITLE D ☐ DELETE
NAME DEL FRANCO, PETER A
STREET ADDRESS 11777 SAN VICENTE BOULEVARD, SUITE 900
CITY-ST-ZIP LOS ANGELES CA 90049

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director and President ☒ Change ☐ Addition
1.2 NAME Vereda
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Director/ Exec. VP & CFO ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Senior Vice President ☐ Change ☒ Addition
4.2 NAME Peter R. O'Keefe
4.3 STREET ADDRESS 11777 San Vicente Blvd., #900
4.4 CITY-ST-ZIP Los Angeles, CA 90049

5.1 TITLE Vice President ☐ Change ☒ Addition
5.2 NAME Thomas Gaston
5.3 STREET ADDRESS 384 Inverness Drive South #100
5.4 CITY-ST-ZIP Englewood, CO 80112

6.1 TITLE Secretary ☐ Change ☒ Addition
6.2 NAME Betty J. Kenyon
6.3 STREET ADDRESS 11777 San Vicente Blvd., #900
6.4 CITY-ST-ZIP Los Angeles, CA 90049

14. I do 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 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

Secretary

3/28/97

(310) 820-6661

Date

Daytime Phone #

CR2E034 (9/96)