

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P96000016576**

1. Entity Name

**DESTINATION PALM COAST HOTEL, INC.****FILED**  
**Feb 06, 2001 8:00 am**  
**Secretary of State**

02-06-2001 90247 023 \*\*\*150.00

910429



DO NOT WRITE IN THIS SPACE

Principal Place of Business <b>HARBORSIDE INN AT PALM COAST 300 CLUBHOUSE DRIVE PALM COAST FL 32137 US</b>	Mailing Address <b>11777 SAN VICENTE BOULEVARD SUITE 900 LOS ANGELES CA 90049</b>
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number <b>59-3362781</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**

<b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301</b>
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Name
Street Address (P.O. Box Number is Not Acceptable)
City
<b>FL</b> 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.**SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEO PLATT, JOHN B III 26 W MICHELTORENA ST SANTA BARBARA CA 93101-2527</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S TALMAGE, LEANNE 11777 SAN VICENTE BLVD # 900 LOS ANGELES CA 90049</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP O'KEEFE, PETER R 11777 SAN VICENTE BLVD, #900 LOS ANGELES CA 90049</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP GASTON, THOMAS 10333 E. DRY CREEK RD #450 ENGLEWOOD CO 80112</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>D/P Charles S. Peck 10333 E. Dry Creek Road., #450 Englewood, CO 80112</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S KENYON, BETTY J 11777 SAN VICENTE BLVD, #900 LOS ANGELES CA 90049</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>D/SVP/T Peter A. Del Franco 11777 San Vicente Blvd., Suite 900 Los Angeles, CA 90049</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>EVP Ronald E. Silva 140 Pacific Ave. San Francisco, CA 94111</b>

**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: Leanne Talmage Leanne Talmage, Secretary January 30, 2001  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
310-571-4345

CR2E034 (10/00)

**DESTINATION PALM COAST HOTEL, INC.**  
**State of Florida**  
**2001 Uniform Business Report (UBR)**

Attachment #  
P96000016576  
916429

12. Additions/Changes to Officers and Directors in 11 (Continued):

John M. DeMarco  
Senior Vice President and Corporate Counsel  
11777 San Vicente Blvd., Suite 900  
Los Angeles, CA 90049

Dennis J. Fischer  
Senior Vice President  
10333 East Dry Creek Road, Suite 450  
Englewood, CO 80112

Kathleen McIntee  
Senior Vice President  
10333 East Dry Creek Road, Suite 450  
Englewood, CO 80112

Salve A. Pennya  
Senior Vice President and Assistant Secretary  
11777 San Vicente Blvd., Suite 900  
Los Angeles, CA 90049

John R. Hemphill  
Vice President  
One Corporate Plaza  
Palm Coast, FL 32135-4489

Kirk R. Poe  
Vice President  
10333 East Dry Creek Road, Suite 450  
Englewood, CO 80112

Patricia Simpson  
Vice President  
One Corporate Plaza  
Palm Coast, FL 32135-4489