## 2905 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## FILED **DOCUMENT # P96000016576** 1. Entity Name 05 APR 12 PM 3: 09 DESTINATION PALM COAST HOTEL, INC. Mailing Address Principal Place of Business PALM COAST GOLF RESORT 11777 SAN VICENTE BOULEVARD 300 CLUBHOUSE DRIVE **SUITE 900** LOS ANGELES, CA 90049 PALM COAST, FL 32137 2. Principal Place of Business 3. Mailing Address 11777 San Vicente Blvd., Suite, Apt. #, etc. Suite 900 Suite, Apt. #, etc. 04082005 Chq-P CR2E034 (10/03) City & State City & State Applied For 4. FEI Number Los Angeles, CA 59-3362781 Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П 90049 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 City 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 9. Election Campaign Financing \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. CEO Delete TITLE ☐ Addition TITLE Change PLATT, JOHN B III NAME NAME 2060 ALAMEDA PADRE SERRA STREET ADDRESS STREET ADDRESS SANTA BARBARA, CA 93103 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME LARSEN, LEANNE NAME STREET ADDRESS 11777 SAN VICENTE BLVD # 900 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LOS ANGELES, CA 90049 TITLE ☐ Delete TITLE Change ☐ Addition O'KEEFE, PETER R 500050555745 NAME NAME STREET ADDRESS 11777 SAN VICENTE BLVD, #900 STREET ADDRESS CITY-ST-2IP CITY-ST-ZIP LOS ANGELES, CA 90049 TITLE Delete TITLE ☐ Change ☐ Addition PECK, CHARLES S NAME NAME 10333 EAST DRY CREEK ROAD, #450 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ENGLEWOOD, CO 80112 CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition POLADIAN, AVEDICK B NAME NAME STREET ADDRESS 11777 SAN VICENTE BLVD., STE., 900 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LOS ANGELES, CA 90049 ☐ Delete TITLE ☐ Addition TITLE ☐ Change NAME HICKEY, MARK F NAME 10333 E. DRY CREEK ROAD, SUITE 900 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ENGLEWOOD, CO 80121 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 approvered.

NO TYPED OR PRINTED NAME OF SIGNING OFFICE

ICER OR DIRECTOR

SIGNATURE:



## DESTINATION PALM COAST HOTEL, INC. State of Florida 2005 For Profit Corporation Amended Annual Report

## 10. Additional Officers/Directors

V John M. DeMarco 11777 San Vicente Blvd., Suite 900 Los Angeles, CA 90049

V Kathleen McIntee 10333 East Dry Creek Road, Suite 450 Englewood, CO 80112

V Salve A. Pennya 11777 San Vicente Blvd., Suite 900 Los Angeles, CA 90049

VP Robert D. DeVore 300 Ocean Hammock Dunes Parkway Palm Coast, FL 32137

V Vincent J. Mennella 10333 E. Dry Creek Road, Suite 450 Englewood, CO 80112

V Gregg A. Harper 300 Clubhouse Drive, Palm Coast, FL 32137



ACCOUNT NO. : 07210000032

REFERENCE: 307855

AUTHORIZATION :

5041389

COST LIMIT : \$ 61.25

·

ORDER DATE: April 11, 2005

ORDER TIME: 10:08 AM

ORDER NO. : 307855-025

CUSTOMER NO: 5041389

CUSTOMER: Ms. Leanne Larsen

Lowe Enterprises, Inc.

Suite 900

11777 San Vicente Blvd. Los Angeles, CA 90049

ANNUAL REPORT FILING

NAME: DESTINATION PALM COAST

HOTEL, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext. 2956

EXAMINER'S INITIALS: