2002 Uniform Business Report (UBR)

changed, or on an attachmen

SIGNATURE:

Mar 25, 2002 8:00 am P97000102657 DOCUMENT # **Secretary of State** 1. Entity Name SWIRE HOTEL DEVELOPMENT INC. 03-25-2002 90138 028 ***150.00 Principal Place of Business Mailing Address 501 BRICKELL KEY DRIVE 501 BRICKELL KEY DRIVE 516073 SUITE 600 SUITE 600 MIAMI FL 33131 MIAMI FL 33131 AMN: BEVERLEY ATTA! BEVERLEY CARBY 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0816112 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent toland, gregg e Street Address (P.O. Box Number is Not Acceptable) **501 BRICKELL KEY DRIVE** SUITE 600 **MIAMI FL 33131** 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. SIGNATURE 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 4 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, 2002 Fee will be \$550.00 Trust Fund Contribution. 1 Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition NAME KELLY, J. MEGAN NAME STREET ADDRESS 501 BRICKELL KEY DRIVE, SUITE 600 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-7IP <u>COD</u> COB TITLE □ Delete TITLE ☐ Addition NAME Kerr, Keith G NAME 501 BRICKELL KEY DRIVE, SUITE 600 STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI FL 33131 CITY-ST-ZIP TITLE DPO ☐ Delete TITLE ☐ Addition OWENS, STEPHEN L NAME STREET ADDRESS 501 BRICKELL KEY DRIVE, SUITE 600 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP OST a teo ☐ Delete TITLE Change Change ☐ Addition TOLAND, GREGG E NAME 501 BRICKELL KEY DRIVE, SUITE 600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP AS₀ TITLE Delete TITLE Change ☐ Addition BEVERIEY C. CARBY NAME CARBY, BEVERLY NAME STREET ADDRESS 501 BRICKELL KEY DRIVE, STE 600 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

FILED