2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #V01997

CITY-ST-ZiP

STREET ADDRESS

CITY-ST-7/P

THIE

NAME

SAINT PETERSBURG, FL 33701



FILED

Feb 22, 2008 8:00 am

Secretary of State HERITAGE HOTEL HOLDING COMPANY 02-22-2008 90014 024 ***150.00 Principal Place of Business Mailing Address 11101 ROOSEVELT BLVD. N. 11101 ROOSEVELT BLVD, N. 4TH FLOOR, LEGAL DEPT. 4TH FLOOR, LEGAL DEPT. ST PETERSBURG, FL 33716 ST PETERSBURG, FL 33716 IIS US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02042008 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For Not Applicable 59-3099782 Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HAIRE, NANCY C Street Address (P.O. Box Number is Not Acceptable) 11101 ROOSEVELT BLVD. N. 4TH FLOOR, LEGAL DEPT. ST PETERSBURG, FL 33716 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. Lam 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 algrature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution After May 1, 2008 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. D/P TITLE ☐ Delete TITLE Change Indition I BRUBAKER, RICHARD M NAME STREET ADDRESS 360 CENTRAL AVE STREET ADDRESS 11101 Roosevelt Blvd. N. CITY-ST-7IP ST. PETERSBURG, FL 33701 CITY-ST-ZIP St. Petersburg, Florida 33716 AS TITLE ☐ Delete TITLE ☑ Change Addition HAIRE, NANCY C NAME NAME STREE1 ADDRESS 360 CENTRAL AVE STREET ADDRESS 11101 Roosevelt Blvd. N. ST. PETERSBURG, FL 33701 CITY-ST-ZIP City-St-7IP St. Petersburg, Florida 33716 TITLE AS ☐ Delete TITLE Change ☐ Addition TRUDEL, STEPHANIE D NAME NAME STREET ADDRESS 360 CENTRAL AVE STREET ADDRESS 11101 Roosevelt Blvd. N. SAINT PETERSBURG, FL 33701 CITY-ST-ZIP CITY-ST-ZIP St. Petersburg, Florida 33716 TITLE X Delete TITLE Change **X**Addition WHITE, JOHN T NAME Hoffman, Gregory L. STREET ADDRESS 360 CTRL AVE STREET ADDRESS 11101 Roosevelt Blvd. N. CITY-ST-ZIP SAINT PETERSBURG, FL 33701 CITY-ST-ZIP St. Petersburg, Florida 33716 TITLE AVP ☐ Defete TUTLE M Change Addition WINKLER, MARK E NAME NAME 360 CENTRAL AVE STREET ADDRESS STREET ADDRESS 11101 Roosevelt Blvd. N.

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 empowered

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Defete

St. Petersburg, Florida 33716

Change

[] Addition

SIGNATURE:	bace	, C Hau	Nancy C	. Haire.	Asst.	Secretary	2/8/2008 727-82	23-4000
SH	GNATURE AND TYP	OO PRINTED NAME OF SIGNING			-	Oate	Daytine Phone	