2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

2ND FLOOR

1201 HAYS STREET

TALLAHASSEE FL 32301

V14286 **DOCUMENT #**

1. Entity Name

HOTEL FUND, INC.

Principal Place of Business

1201 HAYS STREET

TALLAHASSEE FL 32301

2ND FLOOR



FILED Feb 04, 2003 8:00 am Secretary of State

02-04-2003 90073 020 ***150.00

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City & State Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip Country Sincertificate of Status Desired Since Against Name Name Name Name Name Name Name Name CORPORATION INFORMATION SERVICES INC. 1201 HAYS STREET TALLAHASSEE FL 32301 City FL Zip Code City FL Zip City City FL Zip Code Cit	2. Principal Pla	ace of Busin	ess	3. Mailir	3. Mailing Address				1 1#M1FMJI1	181 (1811 51515 11 5 7)	. 1911B BH1 61611			
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6. Name and Address of Current Registered Agent	City & State		 -	City 8	City & State				4. FEI Number 58-1994708 Applied For Not Applicable					
CORPORATION INFORMATION SERVICES INC. 1201 HAYS STREET TALLAHASSEE FI 32301 City FL Zip Code 6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and ac the obligations of registered agent. 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and ac the obligations of registered agent. 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and ac the obligations of registered agent. 8. GNATURE Signature is pool or ground state of imprisons agent and shell activation. After May 1, 2003 Fee will be \$550.00 Mcke Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIR	Zip Country Zip				Country			5. 0	Certificate of	Status Desired	d 🗆			
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12. Legeby 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.	40 16	postific that t	he intermetion cumplies	d with this filing	does not qualify fr	or the ex	emption stated in	n Section	119.07(3)(i), Florida Statu	tes. I further	certify that th	ne information	

I nereby 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 of 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 of these 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 attackment with an address, with all other like empowered.

SIGNATURE:

STERRIFURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGN