

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V14286

**Entity Name:** HOTEL FUND, INC.

**Current Principal Place of Business:**

310 VIA LINDA  
PALM BEACH, FL 33480

**Current Mailing Address:**

PO BOX 3530  
RESTON, VA 20195 US

**FEI Number: 58-1994708**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           SPIVACK, EDMUND S  
Address        PO BOX 3530  
City-State-Zip: RESTON VA 20195

Title           P  
Name           SPIVACK, EDMUND S.  
Address        PO BOX 3530  
City-State-Zip: RESTON VA 20195

Title           T  
Name           SPIVACK, EDMUND S.  
Address        PO BOX 3530  
City-State-Zip: RESTON VA 20195

Title           S  
Name           SPIVACK, EDMUND S.  
Address        PO BOX 3530  
City-State-Zip: RESTON VA 20195

Title           ASST. SECRETARY  
Name           HUNTER, NANCY  
Address        PO BOX 3530  
City-State-Zip: RESTON VA 20195

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: NANCY HUNTER**

**ASST SECRETARY**

**04/22/2019**

Electronic Signature of Signing Officer/Director Detail

Date