

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08295

**Entity Name:** HOST RESTAURANTS, INC.

**Current Principal Place of Business:**

10400 FERNWOOD ROAD  
BETHESDA, MD 20817

**Current Mailing Address:**

10400 FERNWOOD ROAD  
BETHESDA, MD 20817 US

**FEI Number:** 95-3365180

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            PRESIDENT, DIRECTOR  
Name            BROWN, WILLIAM P.  
Address        10400 FERNWOOD ROAD  
City-State-Zip: BETHESDA MD 20817

Title            VP, ASST. SECRETARY  
Name            BRENNEMAN, MARGERY  
Address        10400 FERNWOOD ROAD  
City-State-Zip: BETHESDA MD 20817

Title            VP, ASST. SECRETARY  
Name            GREENE, SONIA H.  
Address        10400 FERNWOOD ROAD  
City-State-Zip: BETHESDA MD 20817

Title            ASST. TREASURER  
Name            ORDONE, JEREMY  
Address        10400 FERNWOOD ROAD  
City-State-Zip: BETHESDA MD 20817

*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:** ANDREW P.C. WRIGHT

**SECRETARY**

**03/04/2022**

Electronic Signature of Signing Officer/Director Detail

Date