

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 30 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 846367 (1)
 1. Corporation Name
RADISSON HOTEL CORPORATION



Principal Place of Business 12755 STATE HIGHWAY 55 MINNEAPOLIS MN 55441	Mailing Address P. O. BOX 59159 ATTN: TAX DEPT. MINNEAPOLIS MN 55459-8200 US
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 06/27/1980	3a. Date of Last Report 05/01/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 41-0940175	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. City	FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent; signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAMANN, D.M.	1.2 NAME	
STREET ADDRESS	12755 STATE HWY. 55	1.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS MN	1.4 CITY-ST-ZIP	
TITLE	CD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARLSON, C L	2.2 NAME	
STREET ADDRESS	12755 STATE HWY 55	2.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS, MN 00000	2.4 CITY-ST-ZIP	
TITLE	VT <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIRACLES, J.M.	3.2 NAME	
STREET ADDRESS	12755 STATE HWY 55	3.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS, MN 00000	3.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NORLANDER, JOHN	4.2 NAME	Curtis C. Nelson
STREET ADDRESS	12755 ST HWY 55	4.3 STREET ADDRESS	12755 Stae Hwy 55
CITY-ST-ZIP	MINNEAPOLIS MN	4.4 CITY-ST-ZIP	Minneapolis MN 55441
TITLE	VS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERKWITZ, ROBERT S	5.2 NAME	
STREET ADDRESS	12755 ST HWY 55	5.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS, MN 00000	5.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAY WITZEL	6.2 NAME	
STREET ADDRESS	12755 STATE HWY 55	6.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS MN	6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____

CR2E034 (9/96)