


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 DEC 11 PM 12:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F01000000887**
 1. Entity Name
HAI Management, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7170 Riverwood Dr
 Suite, Apt. #, etc.
Suite A
 City & State
Columbia, MD
 Zip
21046 Country
USA

3. Mailing Address
7170 Riverwood Dr
 Suite, Apt. #, etc.
Suite A
 City & State
Columbia, MD
 Zip
21046 Country
USA

REINSTATEMENT 07
 DO NOT WRITE IN THIS SPACE

4. FEI Number
62-1183579 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
 Name
Robert Thollander
 Street Address (P.O. Box Number is Not Acceptable)
151 Lookout Place, Suite 201
 City
MAITLAND FL Zip Code
32751

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Robert Thollander** DATE **10/1/2003**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00
 After May 1, Fee is \$550.00
 Amended UBR is \$61.25
Make Check Payable to Florida Department of State

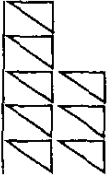
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE P	NAME Udoff, Robert S.	TITLE	800025408238
STREET ADDRESS 7170 Riverwood Dr	CITY-ST-ZIP Columbia, MD 21046	STREET ADDRESS	12/11/03--01011--012 **\$150.00
TITLE STD	NAME Hooper, Bethany H.	TITLE	
STREET ADDRESS 7170 Riverwood Dr	CITY-ST-ZIP Columbia, MD 21046	STREET ADDRESS	
TITLE AS	NAME Thollander, Robert	TITLE	
STREET ADDRESS 1961 King Arthur's Court	CITY-ST-ZIP Winter Park, FL 32792	STREET ADDRESS	
TITLE AS	NAME Barila, Timothy P	TITLE	
STREET ADDRESS 7170 Riverwood Dr	CITY-ST-ZIP Columbia, MD 21046	STREET ADDRESS	
TITLE AS	NAME Cavanaugh, Margaret M	TITLE	
STREET ADDRESS 7170 Riverwood Dr	CITY-ST-ZIP Columbia, MD 21046	STREET ADDRESS	
TITLE CD	NAME Humphrey, James I Jr.	TITLE	
STREET ADDRESS 7170 Riverwood Dr	CITY-ST-ZIP Columbia, MD 21046	STREET ADDRESS	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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 on an attachment with an address, with all other, as empowered.

SIGNATURE: **Robert Udoff** DATE **12-5-03** DAYTIME PHONE # **443-259-4900**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)



HUMPHREY HOSPITALITY MANAGEMENT, INC.

December 5, 2003

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

**RE: HAI MANAGEMENT INC.
DOCUMENT # F0100000887**

Dear Sir or Madam:

I recently received notification that the above referenced entity had been administratively revoked from doing business in Florida for not having filed the annual report/uniform business report. I spoke with a representative and informed them that we had never received the form to submit. I was then told that I could get the form from the web page and that I should include this correspondence stating that we had not received the original form.

I am enclosing the filled out form and a check for \$150 based on the amount due for timely filing. If there is something more I need to do, please contact me at (443) 259-4932.

Thank you for your cooperation with this matter.

Sincerely,

HUMPHREY MANAGEMENT


Sheri McGowan
Controller
(443) 259-4932

/sm