


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90545 002 ***150.00

DOCUMENT # P19636
 1. Entity Name
HAMPTON INNS, INC.




Principal Place of Business
9336 CIVIC CENTER DR
BEVERLY HILLS, CA 90210 US

Mailing Address
9336 CIVIC CENTER DR
BEVERLY HILLS, CA 90210 US

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country



04022004 Chg-P CR2E034 (10/03)

4. FEI Number
62-1194362 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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.

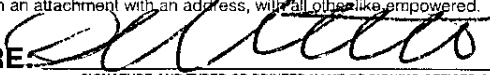
SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	VPS	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	M. HUE, SMITH III			NAME			
STREET ADDRESS	9336 CIVIC CENTER DR			STREET ADDRESS			
CITY-ST-ZIP	BEVERLY HILLS, CA 90210			CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HART, MATTHEW J			NAME			
STREET ADDRESS	9336 CIVIC CENTER DR			STREET ADDRESS			
CITY-ST-ZIP	BEVERLY HILLS, CA 90210			CITY-ST-ZIP			
TITLE	VP	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	STANDEFER, W. STEVEN			NAME			
STREET ADDRESS	9336 CIVIC CENTER DR			STREET ADDRESS			
CITY-ST-ZIP	BEVERLY HILLS, CA 90210			CITY-ST-ZIP			
TITLE	P	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HUCKESTEIN, DIETER H			NAME			
STREET ADDRESS	9336 CIVIC CENTER DR			STREET ADDRESS			
CITY-ST-ZIP	BEVERLY HILLS, CA 90210			CITY-ST-ZIP			
TITLE	AS	<input type="checkbox"/> Delete		TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MAROTE, DAVID			NAME	MAROTE, DAVID		
STREET ADDRESS	9336 CIVIC CENTER DR			STREET ADDRESS			
CITY-ST-ZIP	BEVERLY HILLS, CA 90210			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE  **DAVID MAROTE** **4/21/04** **310-278-4321**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #