

1.) CORPORATION NAME:

HPT CY TRS, Inc.

DUE DATE: **11/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER 16TH FL
1111 E MAIN ST**

SCC ID NO: **F1914441**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MD

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: TWO NEWTON PLACE
255 WASHINGTON STREET STE 300

CITY/ST/ZIP: NEWTON, MA 02458

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	JOHN G MURRAY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/COO/SEC		
ADDRESS:	TWO NEWTON PLACE		
CITY/ST/ZIP/CO:	255 WASHINGTON STREET, SUITE 300 NEWTON, MA 02458		

NAME:	ETHAN S BORNSTEIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	TWO NEWTON PLACE		
CITY/ST/ZIP/CO:	255 WASHINGTON STREET, SUITE 300 NEWTON, MA 02458		

NAME:	JACQUELYN S ANDERSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SEC		
ADDRESS:	TWO NEWTON PLACE		
CITY/ST/ZIP/CO:	255 WASHINGTON STREET, SUITE 300 NEWTON, MA 02458		

NAME:	MARK L KLEIFGES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO/TRES		
ADDRESS:	TWO NEWTON PLACE		
CITY/ST/ZIP/CO:	255 WASHINGTON STREET, SUITE 300 NEWTON, MA 02458		

NAME:	BARRY M PORTNOY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	TWO NEWTON PLACE		
CITY/ST/ZIP/CO:	255 WASHINGTON STREET, SUITE 300 NEWTON, MA 02458		

NAME:	ADAM D PORTNOY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	TWO NEWTON PLACE		
CITY/ST/ZIP/CO:	255 WASHINGTON STREET, SUITE 300 NEWTON, MA 02458		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MARK L KLEIFGES	MARK L KLEIFGES, CFO/TRES	10/23/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.