

## EXHIBIT A

Gilliam et al. v. HBE Corporation, d/b/a Adam's Mark Hotels, State of Florida v. HBE Corporation, d/b/a Adam's Mark Hotels, Civil No. 99-596-CIV-ORL-22C

### **NOTICE OF PROPOSED SETTLEMENT WITH HBE CORPORATION AND HBE-FLORIDA CORPORATION D/B/A ADAM'S MARK HOTELS AND FREDERICK S. KUMMER**

If you are a person who was a registered guest, or who stayed at the Daytona Beach Adam's Mark Hotel (the "DBAMH"), during 1999 Black College Reunion Weekend ("1999 BCR") which took place from April 9-11, 1999, you may be entitled to receive a monetary payment from the Four Hundred Thousand Dollars (\$400,000) Injured Consumers Fund settlement of this case. The amount that each eligible consumer will receive will be determined by the number of persons seeking compensation, and the distribution of the fund will be made on a pro rata basis. No person, however, shall receive more than \$1000.00.

The fact that you have received this notice does not by itself mean that you are eligible to receive a monetary payment. It means that the information available to the State of Florida suggests that you may be eligible.

In addition, you are requested to identify the names, addresses, and phone numbers of all roommates who stayed overnight in your room at the Daytona Beach Adam's Mark Hotel during 1999 BCR.

You have an opportunity to participate in the settlement of the lawsuit. If you want to participate in the settlement and file a claim for a monetary award, you must file the enclosed Claim Form. This form must be completed and mailed to the Claims Administrator:

Lewis B. Freeman & Partners, Inc.  
P.O. Box 339085  
Miami, Florida 33233-9085

**The Claim Form must be postmarked on or before March 15, 2002. No late claim forms will be considered.**

You are not required to participate in the settlement. If you do not participate in the settlement, you will keep your right, if any, to sue the Adam's Mark Hotel in connection with 1999 BCR. Any lawsuit you want to file must be done within the legal time frames and you should consult an attorney concerning the applicable statute of limitations.

If you participate in the settlement, you will be waiving all of your rights to sue the DBAMH for 1999 BCR, including but not limited to, any claim for racial discrimination or unfair treatment. To participate in the settlement, you must submit a claim form to the Claims Administrator listed above. Also, you must sign a Release. The Release will prevent you from bringing any claims whatsoever against the Adam's Mark Hotel in connection with BCR 1999. In exchange for signing

the Release, you will receive a portion of the money in the Injured Consumers Fund. All persons who participate in the settlement will receive an equal share of the Fund, after deduction of the costs incurred by the Attorney General in administering the fund. The exact amount you will receive will depend on the number of people participating in the settlement. However, the maximum amount anyone will receive is \$1000.00. Your receipt of an equal share of the Injured Consumers Fund will constitute a full and complete settlement of any and all claims you may have against the Defendants DBAMH for 1999 BCR.

You will also have the option to donate your share of the Injured Consumers Fund settlement proceeds to Florida's historically Black colleges and universities (Florida Agricultural and Mechanical University, Bethune-Cookman College, Edward Waters College, and Florida Memorial College) by making an appropriate election on the Claim Form. If you choose to donate your share of the Injured Consumers Fund settlement proceeds to Florida's historically Black colleges and universities, you will still be required to sign a release in exchange for your share being donated and said donation will constitute a full and complete settlement of any and all claims you may have against the Defendants DBAMH for 1999 BCR.

If you change your address or phone number after you file a claim form in this case, you must notify the Claims Administrator of your new address or phone number as soon as possible. Failure to keep the Claims Administrator informed of your address and phone numbers may result in the loss of any monetary award you might be entitled to receive. Please send address change information to the Claims Administrator at the address listed above and include your old address, new address, new phone numbers, date of birth and social security number.