

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000442

Entity Name: SWH HOTEL, LLC

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

5550 TRIANGLE PARKWAY
SUITE 300
NORCROSS, GA 30092

New Principal Place of Business:

Current Mailing Address:

5550 TRIANGLE PARKWAY
SUITE 300
NORCROSS, GA 30092

New Mailing Address:

FEI Number: 58-2390362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: HYDE, J R III
Address: 17 WEST PONTOTOC AVE, SUITE 200
City-St-Zip: MEMPHIS, TN 38103

Title: MGRM () Delete
Name: PONTIUS, JOHN H
Address: 17 WEST PONTOTOC AVE, SUITE 200
City-St-Zip: MEMPHIS, TN 38103

Title: MGRM () Delete
Name: SCHAEDEL WORTHINGTON, HYDE PROPERTI E S, LP
Address: 5550 TRIANGLE PKWY, SUITE 300
City-St-Zip: NORCROSS, GA 30092

Title: MGRM () Delete
Name: SIGHTS, WILSON
Address: 17 WEST PONTOTOC AVE, SUITE 200
City-St-Zip: MEMPHIS, TN 38103

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN H. PONTIUS

MGRM

04/29/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date