2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000142380

Entity Name: SANTA ROSA HOSPITALITY MANAGEMENT CO.

FILED Aug 13, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	RLOOM DR. DLA, FL 32514	US			
Current Mailing Address:			New Mailing Address:		
	RLOOM DR. DLA, FL 32514	US	PO BOX 374 GULF BREEZE, FL 329	562 US	
FEI Number:	: 20-5932754	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	New Registered Agent:	
7987 HEIR PENSACC The above	N, KONSTANTI RLOOM DR. DLA, FL 32514 named entity se of Florida.	US	purpose of changing its registered	office or registered agent, or both,	
SIGNATU					
Electronic Signature of Registered Agent			ent	 Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SHOOP, OLGA	Delete A BEACH BLVD., STE A-11 FL 32561 US	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	T-D () SOUVORKINE, I 1143 OLD NURS PENSACOLA, F	SERY WAY	Title: (Name: Address: City-St-Zip:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IGOR SOUVORKINE V-P 08/13/2008