


2006 FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 21, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000037452					
1. Entity Name ALLIED/H-INNS, INC.					
Principal Place of Business URDANG & ASSOC. REAL ESTATE ADVISORS 630 W GERMANTOWN PKE, SUITE 300 PLYMOUTH MEETING, PA 19462			Mailing Address URDANG & ASSOC. REAL ESTATE ADVISORS 630 W GERMANTOWN PKE, SUITE 300 PLYMOUTH MEETING, PA 19462		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		07122006 Chg-P CR2E034 (11/05)	
Zip		Country		4. FEI Number 58-2462641	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	URDANG, E. SCOTT		NAME		
STREET ADDRESS	URDANG & ASSOC. 630 W GERMANTOWN PKE, #321		STREET ADDRESS		U00000574998
CITY-ST-ZIP	PLYMOUTH MEETING, PA 19462		CITY-ST-ZIP		08/22/06-80001-018 550.00
TITLE	VS	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BLUM, DAVID		NAME		
STREET ADDRESS	630 W GERMANTOWN PIKE STE 321		STREET ADDRESS		
CITY-ST-ZIP	PLYMOUTH MEETING, PA 19462		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SANFILIPPO, VINCENT		NAME		
STREET ADDRESS	630 W GERMANTOWN PIKE, STE 321		STREET ADDRESS		
CITY-ST-ZIP	PLYMOUTH MEETING, PA 19462		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GRECO, MARK		NAME		
STREET ADDRESS	630 W GERMANTOWN PIKE, STE 321		STREET ADDRESS		
CITY-ST-ZIP	PLYMOUTH MEETING, PA 19462		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FERST, RICHARD J		NAME		
STREET ADDRESS	630 W GERMANTOWN PIKE STE 321		STREET ADDRESS		
CITY-ST-ZIP	PLYMOUTH MEETING, PA 19462		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 exemptions contained 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 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: <i>David J. Blum</i>		David J. Blum		8-14-06 610-834-9500	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	