

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90325 048 ****50.00

DOCUMENT # M00000001071 1. Entity Name BOYKIN FORT MYERS, LLC			
Principal Place of Business 45 W. PROSPECT AVE., GUILDHALL BLVD, SUITE 1500 CLEVELAND, OH 44115		Mailing Address 45 W. PROSPECT AVE., GUILDHALL BLVD, SUITE 1500 CLEVELAND, OH 44115	
2. Principal Place of Business - No P.O. Box # 5847 San Felipe		3. Mailing Address 5847 San Felipe	
Suite, Apt. #, etc. Suite 4650		Suite, Apt. #, etc. Suite 4650	
City & State Houston, TX 77057		City & State Houston, TX 77057	
Zip 77057	Country USA	Zip 77057	Country USA
4. FEI Number 52-2247364		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BOYKIN HOLDING, LLC 45 W. PROSPECT AVE., GUILDHALL #1500 CLEVELAND, OH 44115 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BH Hotel Properties L.P. 5847 San Felipe Suite 4650 Houston, Tx 77057 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BOYKIN, ROBERT W 45 W. PROSPECT AVE., GUILDHALL #1500 CLEVELAND, OH 44115 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CONTI, RICHARD C 45 W. PROSPECT AVE., GUILDHALL #1500 CLEVELAND, OH 44115 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ALEXANDER, ANDREW C 45 W. PROSPECT AVE., GUILDHALL #1500 CLEVELAND, OH 44115 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. 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 is true and accurate and that my 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: BY <u>Jeff Burrell, CFO</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		4-30-07 <small>Date</small>	713 782-9100 <small>Daytime Phone #</small>