

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000007059

**FILED  
Apr 08, 2021  
Secretary of State  
9873838539CC**

**Entity Name:** FELCOR TRS HOLDINGS, L.L.C.

**Current Principal Place of Business:**

3 BETHESDA METRO CTR., STE 1000  
BETHESDA, MD 20814

**Current Mailing Address:**

3 BETHESDA METRO CTR., STE 1000  
BETHESDA, MD 20814 US

**FEI Number:** 75-2916176

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 US

*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

**Authorized Person(s) Detail :**

Title           PRESIDENT AND TREASURER  
Name           HALE, LESLIE D.  
Address        3 BETHESDA METRO CTR., STE 1000  
City-State-Zip: BETHESDA MD 20814

Title           VP  
Name           MAHONEY , SEAN M.  
Address        3 BETHESDA METRO CTR., STE 1000  
City-State-Zip: BETHESDA MD 20814

Title           VP  
Name           BARDENETT , THOMAS  
Address        3 BETHESDA METRO CTR., STE 1000  
City-State-Zip: BETHESDA MD 20814

Title           VP  
Name           AMOS, CRAIG  
Address        3 BETHESDA METRO CTR., STE 1000  
City-State-Zip: BETHESDA MD 20814

Title           VICE PRESIDENT AND SECRETARY  
Name           MCKALIP , FREDERICK D.  
Address        3 BETHESDA METRO CTR., STE 1000  
City-State-Zip: BETHESDA MD 20814

Title           VP  
Name           TURNER, NICOLE  
Address        3 BETHESDA METRO CTR., STE 1000  
City-State-Zip: BETHESDA MD 20814

Title           MEMBER  
Name           RLJ LODGING TRUST MASTER TRS,  
                  INC.  
Address        3 BETHESDA METRO CTR., STE 1000  
City-State-Zip: BETHESDA MD 20814

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** FREDERICK D. MCKALIP

**SECRETARY, BY JULIE        04/08/2021  
PHILLIPS, ATTORNEY-IN-  
FACT**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date