

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000004283

**Entity Name:** RLJ III - EM WEST PALM BEACH, INC.

**Current Principal Place of Business:**

3 BETHESDA METRO CENTER, SUITE 1000  
BETHESDA, MD 20814

**Current Mailing Address:**

3 BETHESDA METRO CENTER, SUITE 1000  
BETHESDA, MD 20814 US

**FEI Number:** 27-3084116

**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

**Officer/Director Detail :**

Title            PRESIDENT, TREASURER &  
                      DIRECTOR  
Name            HALE , LESLIE D.  
Address        3 BETHESDA METRO CENTER, SUITE  
                      1000  
City-State-Zip: BETHESDA MD 20814

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

Title            VP  
Name            BARDENETT, THOMAS  
Address        3 BETHESDA METRO CENTER, SUITE  
                      1000  
City-State-Zip: BETHESDA MD 20814

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

Title            VP  
Name            AMOS, CRAIG  
Address        3 BETHESDA METRO CENTER, SUITE  
                      1000  
City-State-Zip: BETHESDA MD 20814

Title            VP  
Name            TURNER, NICOLE  
Address        3 BETHESDA METRO CENTER, SUITE  
                      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 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 all other like empowered.*

**SIGNATURE:** FREDERICK D. MCKALIP

**SECRETARY, BY JULIE      04/12/2021**  
**PHILLIPS, ATTORNEY-IN-**  
**FACT**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date