FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

na. DOCUMENT # **A9600001719**

BRANDON HOTEL MANAGEMENT, LTD.

gn-Afr

FILED

97 APR -9 PM 12: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



58 - Capital Contributions as

| Mailing Address | Principal Office Address | | G. Sala i di liang di | Shown on record. | |
|---|---|----------------|--|---|--|
| 2817 N.E. 25TH COURT | | | 09/17/1996 | \$990.00 | |
| FT. LAUDERDALE FL 33305 | | | 3a. Date of Last Report | | |
| | | | | 5b. Amount of Capital | |
| | | | 4. State or Country of Formation | Contributions in FLORIDA to date: | |
| 2. Malling Address | 2a. Principal Office Address | | FL | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 6. FEI Number | | |
| | | | 58-22652 | Applied For Not Applicable | |
| City & State | City & State | City & State | | \$8.75 Additional | |
| Zip Country | Z _i p | Zip Country | | Fee Required | |
| | | | | 8. Make check payable to: Dept. of State (See reverse side for fee information) | |
| 9, Name and Address of Current Registered Agent | | | 10. If changed, new Registered Agent/Office | | |
| SPARKMAN, STEVEN L | SPARKMAN, STEVEN L | | | | |
| ONE HARBOUR PLACE, SUITE 400 | Street Addres | | ss (P.O. Box Number is Not Acceptable) | | |
| TAMPA FL 33602 | Suite, Apt. # | | #, etc. | | |
| | City | | | Zip Code | |
| Oa. Pursuant to the provisions of sections 620.1051 and 620 192, Florida Statutes, the above-named limited partnership | | | FL | | |
| the purpose of changing its registered office or reging it am familiar with, and accept the obligations of sec | tion 620.192, Florida Statutes. | Such change wa | | | |
| SIGNATURE (Registered Agent Accepting Appointment) | | | | | |
| A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. | | | | | |
| 11. Name(s) of General Partner(s) | 11a. Address of Each Genera (Do NOT Use Post Office Bo | 10.4 | 11b. City, State & Zip Code | 11c. Registration/ Document Number | |
| INTEGRITY HOTELS, INC. | 115 PERIMETER CENTE | | ATLANTA GA 30346 | F9600004772 | |
| | | | | 3 (8) | |
| | | | |) EO | |
| | | | 400002 | | |
| | | | -04/15 ****1 | 79701102010 | |
| | | | ***** | 91.25 ****191.25 | |
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| Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. | | | | | |
| 12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of | | | | | |
| Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurage and that my eigenfure shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes. | | | | | |
| 1/7/07 | | | | | |
| SIGNATURE DATE 4/17 Typed or Printed Name of General Partner Signing Form LEN NIGMANN Daytime Telephone Number 170 9/3 -9000 | | | | | |
| Typed or Printed Name of General Partner Signing Form | KEN NIGMI | ANN | Daytime Telephone Number 7 | 70 913-9000 | |
| 0001840 | | | | | |