2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Mar 23, 2007 08:00 A Secretary of State DOCUMENT # A97000000723 JHM LEE VISTA HOTEL, LTD. Principal Place of Business Mailing Address **60 POINTE CIRCLE 60 POINTE CIRCLE** GREENVILLE, SC 29615 GREENVILLE, SC 29615 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03012007 CR2E003 (12/06) City & State City & State 4. FEI Number Applied For Not Applicable 58-2304218 Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CUROTTO, DONALD Street Address (P.O. Box Number is Not Acceptable) % SHUTTS & BOWEN 300 SOUTH ORANGE AVENUE, SUITE 1000 ORLANDO, FL 32801 City 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, typed or printed name of registered agent and title if applicable. DATE FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. 12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY DOCUMENT # F95000005260 STREET ADDRESS NÁME JHM ENTERPRISES, INC. STREET ADDRESS 60 POINTE CIRCLE CITY-ST-ZIP CITY-ST-ZIP GREENVILLE, SC 29615 DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HODOOOS76956 DOCUMENT # .03/30/07-80084-014 5hn.nn STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes