

**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004**

DOCUMENT # B03000000373

1. Entity Name

ASHFORD JACKSONVILLE I LP



FILED

04 MAY -4 AM 10:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

14180 DALLAS PARKWAY, SUITE 700
DALLAS TX 75254

Mailing Address

14180 DALLAS PARKWAY, SUITE 700
DALLAS TX 75254

2. Principal Place of Business

14185 DALLAS PARKWAY

3. Mailing Address

Suite, Apt. #, etc.

SUITE 1100

Suite, Apt. #, etc.

City & State

DALLAS, TX

City & State

Zip

75254

Country

Zip

Country



MOORE

CR2E003 (11/03)

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record.

\$5,252,109.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

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 # M03000003848
NAME ASHFORD PROP GENERAL PARTNER SUB I, LLC
STREET ADDRESS 14180 DALLAS PARKWAY, SUITE 700
CITY-ST-ZIP DALLAS TX 75254

STREET ADDRESS 14185 DALLAS PARKWAY, STE 1100
CITY-ST-ZIP DALLAS, TX 75254

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STREET ADDRESS
CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DAVID A. BROOKS

Date

4-14-2004

Daytime Phone #

Handwritten signature/initials

STAPLE CHECK HERE