


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Feb 26, 2007 08:00 AM
Secretary of State

DOCUMENT # B04000000548 1. Entity Name DHM TAMPA HOTEL LESSEE, L.P.	
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Principal Place of Business % CORPORATION TRUST CENTER 1209 ORANGE ST. WILMINGTON, DE	Mailing Address 1001 N. U.S. HWY. 1, SUITE 800 JUPITER, FL 33477
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DO NOT WRITE IN THIS SPACE



02082007 No Chg-LP CR2E003 (12/06)

4. FEI Number 20-2120931	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WEISSLER, ROBERT
STEARNS WEAVER MILLER WEISSLER ALHADEFF &
150 W. FLAGLER ST., SUITE 2200
MIAMI, FL 33130

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

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	
DOCUMENT #	M04000005554
NAME	DHM TAMPA HOTEL LESSEE GP, LLC
STREET ADDRESS	1001 N US HWY 1, SUITE 800
CITY - ST - ZIP	JUPITER, FL 33477
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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03/08/07-80006-002 500.00

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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

SIGNATURE:  **02/20/2007**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE