2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # B04000000549

1. Entity Name
DHM TAMPA HOTEL, L.P.

Principal Place of Business	Mailing Address
% CORPORATION TRUST CENTER 1209 ORANGE ST. WILMINGTON, DE	1001 N. U.S. HWY. 1, SUITE 800 JUPITER, FL 33477

DO NOT WRITE IN THIS SPACE

03272006 No Chg-LP CR2E003 (11/05)

4. FEI Number
20-2120085
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$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

DO NOT WRITE IN THIS SPACE

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.

U00000495700
04/21/06-80021-002 500.00

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and date if applicable

FILE NOW!!! FEE IS $500.00
After May 1, 2006, 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 #	M04000005556
NAME	DHM TAMPA HOTEL GP, LLC
STREET ADDRESS	1001 N. U.S. HWY. 1, SUITE 800
CITY-ST-ZIP	JUPITER, FL 33477
DOCUMENT #	M04000005593
NAME	RIVERWALK GP HOLDINGS LLC
STREET ADDRESS	% 399 PARK AVE.
CITY-ST-ZIP	NEW YORK, NY 10022
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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STAPLE CHECK HERE

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: Laurence Carballo Laurence Carballo 3-27-05 561-207-2700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #