2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004 DOCUMENT # B9700000367

FILED Apr 26, 2004 08:00 AM Secretary of State

1. Entity Name WYNDHAM INTERNATIONAL OPERATING PARTNERSHIP, L.P.				
Principal Place of Business 1950 STEMMONS FREEWAY, SUITE 6001 DALLAS, TX 75207		Mailing Address 1950 STEMMONS FREEWAY, SUITE 6001 DALLAS, TX 75207		
2. Principal Place of	Business	3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03172004 Chg-LP CR2E003 (10/03)
City & State		City & State		4. FEI Number Applied For 75-2714038 Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
6.	Name and Address of Curr	ent Registered Agent	Name	7. Name and Address of New Registered Agent
THE ODELITION	71. F 005. 171. 005. 005. 005. 005. 005. 005. 005.			
1201 HAYS STE TALLAHASSEE		IN SYSTEM, INC.	Street Addr	ress (P.O. Box Number is Not Acceptable)
			City	FL Zip Code
8. The above named the obligations of	sentity submits this statement registered agent.	nt for the purpose of changing	its registered office or re	gistered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signatur	SIGNATURE Signature, typed or printed name of registered agent and trile if applicable.			DATE
9. Capital Contributi as Shown on reco	ons ord, \$6,159,600.00	10. Amount of Ca in FLORIDA to	pital Contributions o date.	
N				GISTERED AND ACTIVE WITH THIS OFFICE. Iment must be filed to change a general partner.
12.	12. GENERAL PARTNER INFORMATION		13.	ADDRESS CHANGES ONLY
NAME WYN	F97000003793 WYNDHAM INTERNATIONAL, INC. 1950 STEMMONS FREEWAY, SUITE 6001 DALLAS, TX 75207		STREET ADDRESS	
1			CITY-ST-ZIP	
DOCUMENT # NAME			STREET ADDRESS	
STREET ADDRESS - CITY-ST-ZIP			CITY- \$1-ZIP	<u> </u>
DOCUMENT# NAME			STREET ADDRESS	05,'03/04-80045-013 526.25
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CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS			STREET ADDRESS	
			CHY-SI-ZIP	
OCCUMENT / NAME			STREET ADDRESS	
STREET ADDRESS CITY - ST - ZIP			City+St-Zip	
14. I hereby certify to indicated on this the receiver or tr	hat the information supplied report is the and accurate ustee emits wered to execut	with this filling does not qualify and that my signature shall ha a this report as regulred by Ch	for the exemption stated ve the same legal effect a lapter 620, Florida Statute	in Section 119.07(3)(i), Florida Statutes, I further certify that the information is if made under oath, that I am a General Partner of the limited partnership os

Mark M. Chloupek

SIGNATURE: