2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002587

Entity Name: GENERAL INNKEEPING ACCEPTANCE CORPORATION

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
THREE RAVINIA DRIVE, SUITE 2900 ATLANTA, GA 303462149					
Current Mailing Address:			New Mailing Address:		
THREE RAVINIA DRIVE, SUITE 2900 ATLANTA, GA 303462149					
FEI Number: 62-0695776 FEI Number Applied For () FEI Number		nber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: N			Name and Address of New Registered Agent:		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US					
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.					
SIGNATURE:					
	Electronic	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDIT				S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BRETTSCHNEID	DRIVE, SUITE 2900	Title: Name: Address: City-St-Zip:	VPS (X) Change () Addition HOM, DAVID A THREE RAVINIA DRIVE, SUITE 2900 ATLANTA, GA 303462149	
Title: Name: Address: City-St-Zip:	CHITTY, ROBER	DRIVE, SUITE 2900	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	GUNKEL, ROBER	DRIVE, SUITE 2900	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V () E KOWALESKI, RIG THREE RAVINIA ATLANTA, GA 30	CHARD R DRIVE, SUITE 2900	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition KOWALESKI, RICHARD R THREE RAVINIA DRIVE, SUITE 2900 ATLANTA, GA 303462149	
Title: Name: Address: City-St-Zip:	AS ()E MEYER-ROBERT 747 THIRD AVE, NEW YORK, NY	26TH FL	Title: Name: Address: City-St-Zip:	POA (X) Change () Addition MEYER-ROBERTS, BARBARA 747 THIRD AVE, 26TH FL NEW YORK, NY 10017	
Title: Name: Address: City-St-Zip:	TORRES, HOME	DRIVE, SUITE 2900	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA MEYER-ROBERTS POA 04/27/2006