2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
09 FEB 17 PM 3:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900143744269
02/17/09--01010--004 **300.00

DOCUMENT # F02000002971

1. Entity Name
CNL HOTEL TENANT CORP.

Principal Place of Business	Mailing Address
420 S. ORANGE AVENUE STE 700 ORLANDO, FL 32801	PO BOX 2226 ORLANDO, FL 32802-2226

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1 Post Office Square	1 Post Office Square
Suite, Apt. #, etc 3100	Suite, Apt. #, etc 3100
City & State Boston, MA	City & State Boston, MA
Zip / Country 02109	Zip / Country 02109

12222008 REIN-P CR2E098 (1/07)

4. FEI Number
01-0711249
☐ 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
THOMAS, STEPHANIE J 420 S. ORANGE AVENUE STE 700 ORLANDO, FL 32801	Name CT Corporation System 1200 S Pine Island Rd, Suite 250 Plantation, Florida 33324 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 Connie Bryan Assistant Secretary DATE 2/2/09

Signature, typed or printed name of registered agent and, if applicable, the office address of registered agent

FILE NOW!!! FEE IS $150.00
After January 1, 2009, Fee will be $300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC SENEFF, JAMES M JR 450 S. ORANGE AVE ORLANDO, FL 32801	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Karomjit S. Kalsi 1585 Broadway New York, NY 10036	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT BOURNE, ROBERT A 450 S. ORANGE AVE. ORLANDO, FL 32801	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Michael J. Franco 1585 Broadway New York, NY 10036	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO HUTCHISON, THOMAS J III 420 S. ORANGE AVE., STE 700 ORLANDO, FL 32801	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Michael T. Quinn 1585 Broadway New York, NY 10036	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVP BLOOM, BARRY A.N. 420 S. ORANGE AVE., STE 700 ORLANDO, FL 32801	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Daniel C. Wright 1 Post Office Square Ste 3100 Boston MA, 02109	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GRISWOLD, JOHN A 420 S. ORANGE AVE., STE 700 ORLANDO, FL 32801	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Warren Fields 1 Post Office Square Ste 3100 Boston MA, 02109	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEVP STRICKLAND, C. BRIAN 420 S. ORANGE AVENUE, STE 700 ORLANDO, FL 32801	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Jim Dina 1 Post Office Square Ste 3100 Boston MA, 02109	☐ Change ☐ Addition

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 as changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daniel C. Wright, VP
SIGNATURE AND OFFICER TYPED NAME OF SIGNING OFFICER OR DIRECTOR — Date

2/17