## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 28, 2008 8:00 am Secretary of State

DOCUMENT # F0700001579  1. Entity Name LANTANA HOTEL HOLDINGS, INC.						04-28-2008	90326 04	8 ***150	0.00	
Principal Place of Business Mailing Address			l							
10770 COLUMBIA PIKE STE 200 SILVER SPRING, MD 20901		10770 COLUMBIA PIKE STE 200 Silver Spring, MD 20901								
				- 😜						
Principal Place of Business - No P.O. Box #     Mailing Addr										
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04032008	Chg-P	CR2E03	4 (12/06)			
City & State		City & State		4. FEI Numbe	"20-87a	17248	_ <del></del>	plied For t Applicable		
Zip	Country	Zip Country			5. Certificate	of Status Desired	_ \$	8.75 Add		
	C. None and Address of Colores	Name and Address of County State of Asset						ee Require	<b>d</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name						
CORPORATION SERVICE COMPANY			L,	Street Address (P.O. Box Number is Not Acceptable)						
	S STREET SSEE, FL : 32301-2525	Mr.	Street Address		(F.O. BOX NUMB	er is Not Acceptable	<del></del>			
\\ \\ \	5022,12 02001 2520									
	4		7	City			FL	Zip Code	9	
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										
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 3  9. Election Campaign Financing \$5.00 May Be Added to Fees										
10. OFFICERS AND DIRECTORS 11			11.		ADDITIONS	CHANGES TO OFF	ICERS AND D	DIRECTORS	S IN 11	
TITLE	CP	☐ Delete	TITLE	PICI	5		)	Change	Addition	
NAME STREET ADDRESS	HANLEY, KLEVIN P  10770 COLUMBIA PIKE STE 200			DDRESS 107	KEVIN P. HANLEY 10770 COLUMBIA PIKE SUITE 200					
CITY-ST-ZIP				·ZIP SIL	SILVER SPRING MS 20901					
TITLE	vcs	☐ Delete	TITLE		15/5			Change	Addition	
NAME	WILLIAMS, PAMELA M			PAM	PAMELA M. WILLIAMS					
STREET ADDRESS CITY-ST-ZIP					SILVER SPRING MA 20901					
TITLE	DT	Delete	CITY-ST-	51LV	EK SPKI	NED WID O	<u> 10901 </u>	Change	☐ Addition	
NAME	WARCZAK, CHARLES G	TT Detecte	NAME		RLES G	. WARCZA		Pulgride	Addition	
STREET ADDRESS	10770 COLUMBIA PIKE STE 20	0	STREET A	DORESS 1077	10 COLUN	BIA PIKE	SUITE	200	•	
CITY-ST-ZIP	SILVER SPRING, MD 20901		CITY-ST-	-ZIP SILV	IER SPRIN	16 MB 8				
TITLE "		☐ Delete	TITLE NAME				İ	Change	Addition	
STREET ADDRESS			STREET A	OORESS						
CITY-ST-ZIP			CITY-ST-	- ZIP						
TITLE		☐ Delete	TITLE			<u> </u>		Change	Addition	
NAME CIDECT ADDRESS			name Street a	rDDBECC						
STREET ADDRESS CITY-ST-ZIP			CITY-SI-			•				
TITLE		☐ Delete	TITLE			•		Change	☐ Addition	
NAME			NAME			•				
STREET ADDRESS CITY-ST-ZIP			STREET A							
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										

in erepty certify that the information supplied with this filling does not quality 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 if changed, or on an attaching with an address, with all other like empowered.

**SIGNATURE:** 

SIGNATURE AND DATED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

april 21,2008

30/592-389