



**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 02, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F93000002973</b> 1. Entity Name FM HOTEL COMPANY, INC.	
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Principal Place of Business 1407 UNION AVENUE, SUITE 400 MEMPHIS, TN 38104	Mailing Address 1407 UNION AVENUE, SUITE 400 MEMPHIS, TN 38104
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**DO NOT WRITE IN THIS SPACE**



01172007 No Chg-P CR2E034 (11/05)

4. FEI Number 62-1538404	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  MILL, CLARK 5111 TAMiami TRAIL NORTH NAPLES, FL 34103	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_  
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P COOPER, PACE 1407 UNION AVENUE, STE. 400 MEMPHIS, TN 38104
TITLE NAME STREET ADDRESS CITY- ST- ZIP	S COOPER, DAVID 1407 UNION AVE., STE 400 MEMPHIS, TN 38104
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U0000054502  
03/13/07-80065-013 300.00

U00000654502  
03/13/07-80065-003 450.00

**DO NOT WRITE  
IN THIS SPACE**

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Pace Cooper Pres 2/22/07 901-725-9821  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #